DOCUMENT RESUME

ED 188 366 EC 124 139

TITLE	Project RUN: Handicapped Children's Early Education Program. Final Report, September 1, 1976 to August 31, 1979.
INSTITUTION	North Mississippi Retardation Center, Oxford.
SPONS AGENCY	Office of Education (DHEW), Washington, D.C.
PUB DATE	79
GRANT	G007605901
NOTE	174p.: Print is marginal and may not reproduce well.
EDRS PRICE	MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS	*Demonstration Programs: Early Childhood Education: Educational Therapy: Identification: *Multiple Disabilities: Parent Education: Program Descriptions: *Rural Education: Student Evaluation
IDENTIFIERS	*Project RUN

ABSTRACT

The final report describes Project RUN, funded by the Handicapped Children's Early Education Program to develop a model demonstration program for multiply handicapped children from birth to 8 years or functioning below fourth grade level in a low income rural area. Objectives and accomplishments are reported for the following program components: services to children (to identify preschool age multiply handicapped children, to integrate children from two types of settings, to provide an intensive educational therapeutic program, to provide comprehensive assessments, and to develop individualized program plans): services to parents and surrogate parents (to offer parents training and to train attendent staff in techniques for use with institutionalized children): demonstrations: dissemination: training: coordination strategies: advisory council: staff development: and evaluation. Appendixes, which make up the bulk of the document, include tables on enrollment data: sample forms for an example student: demonstration data: newspaper clippings and newsletters on the project: a report on project materials: a project onsite training schedule: correspondence with agencies, organizations, and doctors: and a summary of parent responses to the program. (SBH)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

EC

ED188366

PROJECT RUN
NORTH MISSISSIPPI RETARDATION CENTER
P. O. BOX 967
OXFORD, MS 38655

HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAM

GRANT #: G00-76-05901

BEST COPY AVAILABLE

FINAL REPORT
SEPTEMBER 1, 1976 TO AUGUST 31, 1979

EC 124139

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
Albert & Randel
Hendrix
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

DEPARTMENT OF HEALTH, EDUCATION AND WELFARE
OFFICE OF EDUCATION
WASHINGTON, D.C. 20202

PROGRAM PERFORMANCE REPORT (Discretionary Grants)

FORM APPROVED
OMB NO. 51-R1091

Further monies or other benefits may be, but will not necessarily be, withheld under this program unless this report is completed and filed as require by existing law and regulations *(45 CFR 121, GSA FMC 74-7).*

Part I

All grantees with awards from programs listed under "General Instructions" above respond.

1. Date of Report: August 31, 1979

2. Grant Number: G00-76-05901

3. Period of Report: From: September 1, 1976 To: August 31, 1979

4. Grantee Name and Descriptive Name of Project:

North Mississippi Early Education Program for the Severely/Profoundly Multiply Handicapped (Project RUN). Project RUN is a three year demonstration project serving fifteen students ages 0-8. Some of the children reside in the community and some reside at the Center.

Certification: I certify that to the best of my knowledge and belief this report *(consisting of this and subsequent pages and attachments)* is correct and complete in all respects, except as may be specifically noted herein.

Typed Name of Project Director(s) or Principal Investigator(s): Genora S. Holloway

Signature of Project Director(s) or Principal Investigator(s): Genora S. Holloway

Part II *("Accomplishment" Reporting)*

A. All grantees, except for those with awards under 13.443 are to respond to this Section A. Grantees under 13.443 go to B of Part II.

All grantees with awards under 13.444 except those supported solely for "Outreach" activities are to follow the organization of categories listed below in presenting their performance reports. The categories are based on activities common to all Early Childhood projects with the exception noted above for projects solely supported for outreach activities.

(1) Direct and Supplementary Services for Children's Services
(2) Parent/Family Participation
(3) Assessment of Child's Progress
(4) Inservice Training for Project Staff
(5) Training for Personnel from other Programs or Agencies
(6) Demonstration and Dissemination Activities
(7) Coordination with other Agencies
(8) Continuation and Replication

The grant application for programs 13.445, 13.446, 13.450, and 13.520 provided for the following functions or activities as categorical headings in the budget and narrative sections:

Research and Development	Dissemination
Demonstration/Service	Preservice/Inservice Training
Evaluation	

Programs 13.451, and 13.452 do not usually require a breakout since the primary function or activity is intrinsic to the respective program.

For each of the above programs, functions, or activities *(as well as those of special import for certain programs; e.g., replication, advisory councils, parent involvement)* discuss the objectives and subobjectives presented in the approved application *(in narrative format)* in terms of:

(a) Accomplishments and milestones met.
(b) Slippages in attainment and reasons for the slippages.

Refer back to your application and utilize your quantitative quarterly projections, scheduled chronological order and target dates, and data collected and maintained as well as criteria and methodologies used to evaluate results for (a) and (b). For grantees under 13.444, in discussing training or personnel from other programs, include descriptions of types of training, institutions or organizations involved, and numbers of trainees and hours of training received.

Also highlight those phases of the plans of action presented in your application that proved most successful, as well as those that upon implementation did not appear fruitful. NOTE: Outreach grantees are to discuss accomplishments and slippages in terms of replication and stimulation of services, resources provided and field testing and dissemination and training in terms of types of personnel receiving training and the number of hours involved.

Grantees finishing this portion of Part II, go to C of Part II.

B. Reporting for Grantees under 13.443 *(Research and Demonstration).*

Discuss major activities carried out, major departures from the original plan, problems encountered, significant preliminary findings, results, and a description and evaluation of any final product. Either include copies of, or discuss: information materials released; reports in newspapers, magazines, journals, etc.; papers prepared for professional meetings; textual and graphic materials; completed curriculum materials and instructional guides, or drafts if in a developmental stage, special methods, techniques and models developed; scales and other measuring devices used.

When finished with this portion of Part II, 13.443 grantees go to C of Part II.

C. All grantees are to respond to this section C. Discuss the following:

(1) Unanticipated or anticipated spinoff developments *(i.e., those which were not part of your originally approved subobjectives, but which are contemplated within the purpose of the Education for the Handicapped legislation, such as new cooperative inter-agency efforts, a decision by volunteer(s) to pursue a career in special education, new public school policy to integrate handicapped children into regular classrooms, enactment of mandatory or other State legislation affecting early education, relevant new course offerings at universities, etc.)*.

(2) Where outputs are quantified in response to any portion of Part II, relate quantifications to cost data for computation of unit costs. Analyze and explain high-cost units.

(3) Indicate other matters which you would like OE to know about *(e.g., community response to the project, matters concerning the project's working relationship with OE, technical assistance of OE staff, or any other relevant subject.)*.

Part III

All grantees with a Demonstration/Service function or activity, except for 13.444 grantees who are solely supported for "outreach" activities, are to complete Tables IA, IB, and IC. All grantees under 13.451, as well as those under other handicapped programs with a Preservice/Inservice Training activity are to complete Table II. All grantees under 13.444 except those who are supported solely for "outreach" activities, are to complete Tables IIIA and IIIB.

Table IA – Demonstration/Service Activities Date

Children

Enter actual performance data for this report period into the appropriate boxes. Use age as of the time of the original application, or the continuation application, whichever is later. On lines above line 11, count multihandicapped individuals only once, by primary handicapping condition, and indicate the number of multihandicapped in line 12. Data for lines 1 through 11 are for those directly served; i.e., services to those enrolled or receiving major services, and not those merely screened, referred or given minimal or occasional services.

Type of Handicap	Number of Handicapped Served by Age					
	Ages 0-2	Ages 3-5	Ages 6-9	Ages 10-12	Ages 13-18	Ages 19 and Over
1. Trainable Mentally Retarded	4		2			
2. Educable Mentally Retarded						
3. Specific Learning Disabilities						
4. Deaf-Blind						
5. Deaf/Hard of Hearing						
6. Visually Handicapped		1				
7. Seriously Emotionally Disturbed						
8. Speech Impaired						
9. Other Health Impaired		1	1			
10. Orthopedically Impaired	6	6	6			
11. Total	10	8	9			
12. Multihandicapped	10	8	9			

If the data in the above table differ by more than 10 percent from the data originally presented in your approved application, please explain the difference.

Table IB

Project Staff Providing Services to Recipients in Table IA

Type of Staff	Number	
	Full-time	Part-time *(As Full-time Equivalents)*
Professional Personnel *(excluding teachers)*	2	.25
Teachers	1	
Paraprofessional	3	

Table IC

If applicable: Services to Those Handicapped Not Included in Table IA

Service	Number of Handicapped
Screened	
Diagnostic and Evaluative	
Found to Need Special Help	20
Other Resource Assistance	75

Table II

Preservice/Inservice Training Data

Handicapped Area of Primary Concentration	Number of Persons Received Inservice Training	Number of Students Received Preservice Training by Degree Sought			
		AA	BA	MA	Post-MA
Multihandicapped					
Administration					
Early Childhood					
Trainable Mentally Retarded					
Educable Mentally Retarded					
Specific Learning Disabilities					
Deaf/Hard of Hearing					
Visually Handicapped					
Seriously Emotionally Disturbed					
Speech Impaired					
Orthopedically and Other Health Impaired					
TOTAL					

If data in Table II above differ by more than 10 percent from those in your approved application, explain.

Table IIIA

Placement of Children Participating in Early Childhood Program During Reporting Period

Indicate the placement of children who left your project during the year covered by this report period.
NOTE: Count each child only once by primary type of placement below.

TYPE OF PLACEMENT			NUMBER OF CHILDREN	
			FULL–TIME	PART–TIME
INTEGRATED PLACEMENT *(i.e., in regular programs with children who are NOT handicapped)*	Nursery schools			
	Day-care programs			
	Head Start			
	Pre-kindergarten			
	Kindergarten			
	Primary grades	First		
		Second		
		Other		
SPECIAL EDUCATION PLACEMENT *(i.e., in classes only for handicapped children but situated in regular private or public school)*	Pre-kindergarten			
	Kindergarten			
	Primary grades	First		
		Second		
		Other	7	
INSTITUTIONAL PLACEMENT	Scheduled to remain in Early Childhood Program in coming year			
	Other *(specify)*			

Table IIIB

Cumulative number of children entered into integrated placement *(if known)* prior to this report period →	NUMBER	Estimated retention rate of cumulative number in integrated placement →	PERCENT %

TABLE OF CONTENTS

Pages

Introduction........ 1-4

Services to Children........ 5-15

Services to Parents and Surrogate Parents........ 16-19

Demonstrations........ 20-21

Dissemination........ 22

Training........ 23-26

Coordination Strategies........ 27-28

Advisory Council........ 29

Staff Development........ 30-31

Evaluation........ 32-38

Spinoffs........ 39

Other Matters........ 40

FEB 26 1980

FINAL REPORT

SEPTEMBER 1, 1976 TO AUGUST 31, 1979

INTRODUCTION

Project RUN was awarded HCEEP funding for three years beginning on September 1, 1976. The program was located in the Charles W. Hartman Diagnostic and Evaluation Center situated on the campus of the North Mississippi Retardation Center. The goal of the program was to develop a model demonstration program for multiply handicapped children between the ages of birth to eight years or functioning below fourth grade level in a low income rural area. The students eligible for services resided in the twenty-three counties served by the North Mississippi Retardation Center and in the Center itself.

During the first year Project RUN encountered numerous setbacks in meeting the objectives as outlined in the proposal. An explanation of this statement and the circumstances are as follows:

1. The North Mississippi Retardation Center did not receive the grant award notice until October 4, 1976.
2. Since September, 1975, the Mississippi State Legislature has required that any new federal grants be approved by the State Budget Commission

prior to implementation. Therefore, the funds were not approved until the next scheduled meeting, which was November 9, 1976.

3. Delay in hiring staff was another major setback. In understanding why there were delays in hiring of program staff, it is important to note that all federal grant staff are considered as state employees. Consequently, they must qualify for their position under the Mississippi State Merit and Classification Systems. These positions were submitted on November 15th after the approval of funds by the Budget Commission on November 9th. The Budget Commission then sent these forms to the Governor, who must personally sign each form to add a new state employee. However, signing by the Governor was delayed due to his absence from his office while on a trip to Europe. These approvals were not received by the Center until December 10, 1976.
4. Due to the delay in approval of staff and hiring of staff through a state agency, the director for the Project, who also served as the teacher, was not hired until January 1, 1977. Other support staff was not hired until March, 1977. This included a parent educator, speech pathologist, physical therapist aide, and teacher aide.
5. The Project was housed temporarily in two rooms because time schedules were not met in the construction of a new school building. The complete occupancy of the projected location for the Project was not made until June, 1977.

6. Delays in housing and hiring of staff delayed offering direct services to children until April, 1977.
7. The director, parent educator, and physical therapist aide terminated their respective employment by July 29, 1977.

These were definite setbacks for the Project, however, a new director was hired and began her duties on August 1, 1977. The director was able to obtain a full staff by November 1, 1977, including a teacher and secretary who were funded through the second year continuation grant. At this time, the staff began with full force its "catch-up" activities.

Although direct services were being provided beginning in April, 1977, there was no systematic data collection system for the services offered or activities engaged in. Therefore, the major portion of the accomplishment data in this report is a result of the services and activities which began after August 1, 1977.

In the original proposal, the objectives for the services and activities to be engaged in were contained under one goal. This goal was to develop a model demonstration class for eight to ten multiply handicapped children in a low rural income area. However, for reporting purposes, it was felt that these objectives could best be summarized in a more systematic quantitative format if they were broken down into specific categories. Therefore, this final report will address each category of services and/or activities separately. These categories are services to children, services to parents, demonstration, dissemination, training, coordination strategies, advisory council, staff development, and evaluation.

The North Mississippi Retardation Center began providing funds for the operation of the demonstration model program on September 1, 1979. The Center is continuing the educational component and parent component (with the exception of home visits) as outlined in this report. Therefore, these areas are addressed in the present tense.

SERVICES TO CHILDREN

Objectives:

To identify preschool age multiply handicapped children in Lafayette and surrounding counties in North Mississippi and children residing at the North Mississippi Retardation Center.

To integrate children from two types of settings (those who reside at home and those who are institutionalized) in a demonstration class located at the North Mississippi Retardation Center.

To provide an intensive educational therapeutic program in which multiply handicapped preschool age children can develop to an optimal level.

To provide comprehensive assessments of these children in medical, educational, language, and social areas.

Objectives: To develop individualized program plans for each child on the basis of the child's comprehensive evaluation.

Accomplishments: Extensive efforts were made during the first year to identify these children. Those agencies and organizations contacted in the twenty-three county area to be served by the Project were: welfare departments, health departments, public schools, developmental centers, "Child Find" chairpersons, hospitals, Associations for Retarded Citizens, United Cerebral Palsy Foundation, March of Dimes Foundation, and the North Mississippi Center Social Work Department. News articles were also released in the twenty-three county area papers.

These contacts were continued during the second and third years of funding to ensure that referrals would be current when a student vacancy occured. The Project also stayed in close contact with the Center's diagnostic and evaluation team. This team is responsible for testing all referrals for services within the area served by the Center.

Classes were established as of April 4, 1977. The original proposal stipulated that eight to ten students would be served. However, Dr. Ed Sontag visited the program in March of 1977 and after a review of the program, stipulated that twenty students be served during the second and third years with the addition of a full time teacher and secretary to the program. However, this stipulation was reduced to fifteen children because of the severity of the handicapping conditions of the children accepted into the program.

The program met this stipulation and added additional students because of the need for services in our area. The Project provided direct services to eighteen (18) community children and nine (9) residential children from April, 1977 through August 31, 1979, making a total of twenty-seven (27). Of these twenty-seven, seven have withdrawn from the program and two are currently at the Crippled Children's Hospital following an operation (these two will return when given a release from the hospital). Of the seven who withdrew, six were unable to make arrangements for transportation and one was withdrawn from the program for medical reasons.

(Appendix A presents enrollment data for the three year period of funding and service delivery process for RUN students).

The early intervention model developed and utilized by the program is described as follows:

Population. The program offers a diagnostic/therapeutic treatment program for residential and community children who range in age from eight months to eleven years and functioning between two and twenty-one months intellectually. The community children reside in the twenty-three county area of northern Mississippi served by the Center. Children who are diagnosed as being severely/profoundly multiply handicapped are served in the program. Diagnoses include cerebral palsy, microcephaly, hydrocephaly, mental retardation, aphasia, Down's syndrome, and spina bifida. As a result of these medical conditions, the children have a combination of two or more severe/profound impairments in the functional areas of speech, motor, intellect, vision, and hearing.

Service/Delivery Tools. The model utilizes the Project RUN Early Education Assessment/Curriculum for the Severely/Profoundly Multiply Handicapped, a Project developed program, for planning and implementing each child's therapeutic treatment program.* The program includes four (4) areas on infant development within the 0-48 month age level. The areas include: auditory discrimination, visual-fine motor, communication, and gross motor (facilitation/maintenance therapy are included in the gross motor area). Supplementary experiences in the areas of sensory perception and socialization are included. These activities are assumed to be an important part of the program for all children but no specific objectives are set for individuals as a part of the therapeutic program; however, it is used by families in the home environment and for group activities within the classroom environment.

The program format lends itself readily for providing instructional alternatives for individual differences (mental/motor/sensory handicaps): (1) the child is allowed to respond to tasks by alternative means of communication (naming, touching, verbal yes/no, gestural yes/no, directional eye movement); (2) the child is allowed to progress through several levels of assistance (physical assistance, minimum physical assistance, verbal cues, and request); (3) the format of the gross motor area allows for individualized procedures to be incorporated into the assessment and teaching procedure by the physical therapist (procedures used are dependent upon the child's physical abnormalities); (4) the communication area provides functional word lists which enable the user to choose words which best meet the child's individual functional needs.

---

*The program also utilizes the Project RUN Assessment/Curriculum for Feeding the Physically Handicapped. However, at the present time, this tool is being revised to meet the needs of children with sensory/mental and motor handicaps.

Although the Assessment/Curriculum provides for various means of response, sometimes a prerequisite to language itself may be required (example: blissymbols, communication boards, pre-speech exercises, etc.). Consultation with other professionals may indicate that such needs exist. If so, these programs are provided as a supplement to the RUN Assessment/ Curriculum. When alternative means of communication are used, the same words/concepts contained in the Assessment/Curriculum word lists are used.

The format of the Assessment/Curriculum is specifically designed to bridge the gap between assessment and program implementation. This was accomplished through: (1) providing a format whereby assessments can be conducted and the program can be implemented using the same form and materials; (2) establishing developmentally sequenced long term objectives (annual goals) for each area; (3) dividing these long term objectives into short term objectives (task analysis of the long term objective); (4) writing each objective in behavioral terms (measurable); (5) forming recording procedures for pinpointing of specific objectives mastered and those which need to be worked on; (6) incorporating a comprehensive formative and summative data collection system into the format. For example, the format contains the long term objectives, the short term objectives to fulfill the long term objectives, materials, and procedures for assessing and teaching. The format also contains space for recording assessment data and for recording the following teaching data; criterion for completion, reinforcement procedures, daily progress for a two week period, and the date when each short term objective was started and completed.

The Assessment/Curriculum forms are printed on heavy weight paper and are contained in a three-ring binder (the users master copy). This enables the user to photocopy the necessary forms for use with each child's assessment and classroom/home/cottage program. Master copies of the Assessment/Curriculum are provided for writing specialized programs. A master copy of a profile form is also included which may be used for charting each child's progress.

Therapeutic Treatment Approach. The program utilizes a diagnostic/ therapeutic treatment approach for program planning and implementation which enlists the aide of North Mississippi Retardation Center staff and parents.

Comprehensive diagnostic evaluations are conducted by the Center's interdisciplinary team prior to each child's admittance to the program and on an annual basis for program modification/recommendations. An informing conference provides the program special educator and parent with an overall view of the child's limitations and capabilities. They also provide the teacher with prerequisite information necessary for determining the support staff needed for designing each child's program.

Evaluations are continued when the child enters the program. Informal assessment through teacher observations and parental information are collected during the first two weeks. During the third week, a formal assessment is conducted using the RUN Assessment/Curriculum for determining specific skills which exist and those which need to be developed.

Following the comprehensive evaluation process, the special edcator, parent, and support staff establish priorities where significant deficits exist and the Individual Education Plan (IEP) is developed. The Assessment/ Curriculum forms, as indicated by the programmatic needs from the IEP, are completed. If specialized programs are indicated, a form is completed for those programs.

The child then receives treatment, as indicated by the programmatic needs, utilizing the Assessment/Curriculum (prescriptive teaching format). The child receives treatment on an individual (one-to-one) basis for one and one half hours, three days per week. These programmatic efforts are then carried over into the home via the parents for the community-based children an via the cottage teacher in the Center-based children's respective cottages. This ensures daily programming in addition to the intensive therapy time.

The program employs the behavior modification principles of reinforcement and prompting cues for eliciting learning. Primary and/or secondary reinforcers are used to structure the learning tasks and elicit desired responses. Prompting cues are systematically utilized to aide in training and eliciting correct responses. These prompting cues include physical assistance, minimum physical assistance, verbal cues, and request. As the child approaches independent task completion, both reinforcement procedures and prompting cues are systematically reduced until criterion level of performance is achieved.

The actual teaching area provides a relatively sterile environment, which is conducive with the use of behavior modification techniques and one-to-one programming in that the instructor has control over the reinforcers and their schedule of administration and distractions and interruptions are reduced. One-to-one instruction is conducted separately from the group usually in a corner of a room or a separate room.

A special education teacher (who also serves as each child's case manager), a teacher aide, and a physical therapist aide are responsible for carrying out the treatment program. However, the treatment program is closely interwoven and integrated with other support disciplines. Individualized (highly specialized) programs by various disciplines are incorporated into the child's program in order to address the child's developmental deficits and intergration of the child's internal sensory system.

The involvement of Center interdisciplinary staff in formulating and implementing the treatment program affects the programming in the following ways;

1. Physical Therapist - provides evaluations and consultation for each child in the gross motor area and provides a program plan and training for the physical therapist aide for carrying out the program. Physical therapy also supplies information concerning the most facilitating positions for each child. This is necessary for the special education aspect in that it will "break up" abnormal reflex patterns and normalize muscle tone; thereby aiding in increasing the child's responses to stimuli presented.

2. Speech-Pathology - provides additional evaluations, consultation, and training on methods to promote language development, expressive language (verbal and non-verbal), and pre-speech, and feeding techniques.

3. Occupational Therapy - provides consultation concerning reflexive action as opposed to voluntary actions and normal fine motor development which allows the teacher to use appropriate techniques when programming for and training the child in fine motor, self-care, and feeding areas. Occupational therapy also provides on-going consultation concerning sensory stimulation that is most facilitating for each particular student, thus enabling

the student to increase his body awareness and occurrence of responses to stimuli presented.

4. Speech Pathology and Occupational Therapy - provide evaluations and consultation concerning oral reflex activitv in conjunction with feeding skills. This provides the teacher with information necessary in implementation of therapeutic feeding techniques as well as alerting these support staff regarding changes in the child's oral/feeding activity.

5. If needed, the psychologist provides consultation concerning behavior modification techniques to attain the desired educational responses to specific objectives.

6. If needed, the dietitian provides consultation as to the appropriateness of certain kinds of foods for each child. This can influence snacks, reinforcement items, etc., that the special educator uses.

7. As appropriate, medical personnel provides information on any medical restrictions prescribed for the child.

Once a month a staffing is held for each child to discuss programmatic changes, problems, progress, as well as suggestions to enhance the child's program. The team consists of members of various departments at the Center (i.e., medical, social services, education, Project RUN, dietary, resident living, physical therapy, recreation, foster grandparents, and psychology).

This meeting is also supplemented by an additional meeting/conference of the Project RUN staff and cottage teacher or parent depending on whether the child is Center or community based respectively. An annual review staffing is also held for each child to discuss yearly progress and to modify/revise the current IEP as needs indicate.

Some of the programmatic procedures and staffing patterns of the eudcational model, as described in the preceding narrative, are a refinement of the model described in previous reports. The refinements which were initiated for the 1978-1979 fiscal year were a result of indicated needs. The refinements which were made as indicated by needs are:

1. Additional information for assessing and teaching has been added to previous information to provide the user with a more detailed description for assessing and teaching.

2. The visual discrimination and fine motor area have been combined to allow for sequential programming.

3. The forms for assessing and teaching have been combined to eliminate excessive printing cost.

4. Maintenance and facilitation therapy, which is prescribed by the physical therapist, were added to the gross motor area. Thereby allowing for a systematic/consistent daily collection system in all areas.

5. A supplementary experiences section containing sensory perception and socialization were added to enhance the

child's experiences within the home and classroom environment. Specific objectives are not set for these areas.

Needs also indicated that a revision was needed in the feeding area of the Project RUN Early Education Assessment/Curriculum for the Severely/Profoundly Multiply Handicapped and the Project RUN Assessment/Curriculum for Feeding the Physically Handicapped. A model for revision is presently being pilot tested to insure that the tool will also be applicable to children with mental and sensory handicaps.

The Project is aware of the need for additional self-care areas. Procedures and techniques are being pilot tested to insure that the needs of children with mental/motor/sensory handicaps will be met. Areas being tested are dressing, handwashing, and toothbrushing.

SERVICES TO PARENTS AND SURROGATE PARENTS

Objectives: To offer parents of multiply handicapped children training in appropriate techniques for use with their children at home.

To train attendent staff at the North Mississippi Retardation Center as surrogate parents in appropriate techniques for use with multiply handicapped children in the institution at times when the children are not attending class.

Accomplishments: The services to parents involve several components. These are: parent conferences, parent meetings, home training visits, referral and supplementary service contacts, assessments and evaluations, and advisory board membership. An explanation of these services are as follows:

1. Classroom Observation and Participation - By offering observation and participation, parents become aware of techniques being used with their child in special education, speech therapy, feeding, and physical therapy. Not only do the parents become aware of these techniques, but they are also given the opportunity to learn them. This enables the parents to incorporate

them into home practice. The staff is on hand to answer any questions the parents may have regarding their child's program. It is also at this time when the parents can provide information about the child which could be beneficial to the staff.

2. Parent Conferences - Individual conference time is offered to the parents by the parent educator. Our parent educator is available to the parents at any time when they are present for programming. During these conferences, parent counseling occurs. Problems dealing with transportation, family matters, or programming schedules are discussed.

3. Monthly Parent Meetings - Techniques and information are presented to the parents in monthly meetings. In the monthly parent meetings, the parent educator organizes mass media presentations or lectures to assist the parents in understanding handicapping conditions or special services and programs. Parent meetings are a good oppurtunity for the parents to interact and share some of their personal experiences they have had with their handicapped child.

4. Home Training Visits - Project RUN feels that home training provides continuity in programming between school and home. At home, the parent acts as the teacher. The parent educator visits in the homes every two weeks and brings skill assignments provided by the special educator or speech pathologist. Specific instructions about the activity and recording procedures are given to the parents in the classroom. The parents record their child's actions, and these data sheets are collected every two weeks. The parents also carry out the prescribed physical therapy exercises at home. This additional training at home provides increased stimulation for the child

and promotes parent-child interaction.

5. Referral and Supplementary Services - Referral information and supplementary services are available to the parents through our parent program. In many cases, this is extremely important especially when helping a parent receive financial assistance for purchasing adaptive equipment. Also, our parents receive information and referrals to Crippled Children's Services, Social Security Administration Offices, Department of Welfare Offices, Health Department Offices, rehabilitation programs, medical specialists, public school programs and children's hospitals.

6. Assessments and Evaluations - A needs assessment is completed by the parents every eight weeks. From this assessment, changes can be made to adjust the program to best serve the parents' needs. Evaluations of the home training program and parent meetings also give the parents a chance to make suggestions for improvement. By offering this type of input, Project RUN gives the parents the opportunity to be actively and directly involved in the goals of parent training.

7. Advisory Board Membership - Although not a part of the parent training program, four of our parents were included on the Project RUN Advisory Board. They were able to have a voice in the goals and strategies proposed for Project RUN. This strengthened parental involvement and interest, while making Project RUN a better program.

Table I represents comprehensive data of services to parents of children enrolled in the program from October, 1977 to August 31, 1979. (Appendix B contains a parent involvement and training case study.)

TABLE I

SERVICES TO PARENTS

	Total Number of Times
Classroom Observation and Participation	1,038
Parent Conferences	51
Parent Meetings	15
Home Training	177
Referral and Supplementary Service Contacts	70
Assessments and Evaluations	89

The surrogate parents at the Center are actively involved in the programming for their children in the areas of feeding, group activities, positioning, special education, and communication. The surrogate parents feed their child and collect daily data, help their child in group activities, use appropriate positioning techniques when moving the child or when placing the child, and view all special education and communication classes when their child is participating.

In addition to training the RUN students' surrogate parents, the physical therapist aide works with cottage attendents and special educator on proper feeding techniques.

The RUN staff also provided in-service for all new employees at the North Mississippi Retardation Center from October, 1977 through March, 1979. The in-service consisted of on-site observations and a lecture/demonstration program entitled "Programming for the Physically Handicapped".

DEMONSTRATIONS

Objectives:	To demonstrate to parents, teachers, administrators, etc., the value of early intervention in promoting optimal development in multiply handicapped children. To foster public interest in the area of provision of services for the multiply handicapped.

Accomplishments: During the second and third year of the program demonstrations were of primary importance. Efforts were made to insure that individuals throughout the state were informed of the program's existence and were given the opportunity to observe the program. As a result of publicity, personal contacts, dissemination of brochures, an "Open House", and presentations, RUN has a total of 1,259 persons observe the program from September 1, 1977 through August 31, 1979. These demonstration activities consisted of an overview of the total program and demonstration of techniques and procedures used for programming. Each participant was also given a brochure describing the program.

(Appendix C contains data concerning all demonstrations for this period.)

Demonstrations, presentations, and news releases were the primary activities engaged in to foster public interest.

(News releases are contained in Appendix D.)

Presentations given are listed in Table III.

TABLE III

PRESENTATIONS

Title	Location	Number of Participants	Hours
Project RUN Slides, Lecture	University of Mississippi 1978	30	1
"Parents as Partners"	AAMD/MARC Conference Hattiesburg, MS 1978	10	½
"A Parent Involvement Component"	Mental Health Center Oxford, MS 1978	12	1
"Parents as Partners"	AAMD Conference Jackson, MS 1978	10	1
"Parents as Partners"	MARC Convention Jackson, MS 1979	10	1

DISSEMINATION

Objective: To develop a curriculum plan for including realistic goals, appropriate activities, educational materials, etc., for the multiply handicapped preschool child which will be useful in other settings.

Accomplishments: Project staff and a consultant, provided by WESTAR, developed three Assessment/Curricula during the second year of funding the program also developed other booklets and manuals for dissemination. The entire "package of materials" was available for dissemination in October, 1978. The program has had request orders from 30 states.

(Descriptions of these products are contained in Appendix E.)

Table IV indicates the number disseminated for each product.

TABLE IV

DISSEMINATION

A Parent Component: Involvement and Training	175
Assessment/Curriculum for Feeding the Physically Involved Child	58
Learning Is Fun - A Guide for Parents	178
Prelinguistic Language Assessment/Curriculum	54
Project RUN Bibliography of Resources for Serving the Handicapped	108
Project RUN Early Education Assessment/Curriculum for Serving the Severely/Profoundly Multiply Handicapped	100
Project RUN Materials and Tests Index	85
What Do I Do? A Manual of Basic Information for Parents of Handicapped Children	262
TOTAL	1,020

TRAINING

Objectives: To train special education students and students in related fields from the University of Mississippi and other colleges and universities in specific skills required in working with multiply handicapped children.

To work with other preschoold programs for the handicapped in Mississippi in making available to public school personnel quality in-service training as the state prepares to implement P. L. 94-142

Accomplishments: The program trained 23 students between January 3, 1978 and August 10, 1979. Table V lists the students, their field of study, degree level, and hours of training received.

TABLE V

PRACTICUM AND INTERNSHIP STUDENTS

Student	Field	Degree Level	Hours
Kathy Bowden	Special Education	MA	80
Lynn Rousseau	Special Education	MA	80
Barbara Everette	Special Education	MA	56

TABLE V (cont.)

Student	Field	Degree Level	Hours
Marvin Costin	Special Education	MA	110
Linda Phillips	Special Education	MA	110
Amy Mize	Special Education	BA	15
Cathy Tanner	Elementary Education	Ph.D.	135
Anita Berryman	Elementary Education	BA	27
Beverly Ernest	Elementary Education	BA	51
Janet Caldwell	Elementary Education	BA	14
Laurie Allen	Elementary Education	BA	16½
DeeDee Richardson	Elementary Education	BA	17½
Beth McCarver	Elementary Education	BA	15
Beatrice Flair	Physical Education	BA	60
Gloria Hunter	Physical Education	BA	60
Suzanne Flowers	Social Work	BSW	544
Mary Napier	Social Work	BSW	504
Melanie Moore	Social Work	BSW	490
Cindy Crabb	Social Work	BSW	15
Elaine Williams	Social Work	BSW	15
Jill Shannon	Social Work	BSW	15
Sherry L. Swearengen	Social Work	BSW	460
Donna McNeil	Communications	MA	84

The program was certified as a Model University Affiliated Program in 1977. This recognition indicates that the services provided the developmentally disabled are interdisciplinary in nature. It also indicates the willingness of the staff to provide field experiences for students from high schools, colleges, and universities who may be placed in this program.

RUN began offering on-site training for educational staff in direct service agencies in Mississippi in May, 1978. The training consisted of observations, "hands on" teaching experiences, procedures for assessment and data collection and information sharing in related areas. From May, 1978 through August, 1979 the program trained 22 direct service agency staff.

(Appendix F contains a typical schedule for training.)

Table VI lists trainees, their position, and number of hours training.

TABLE VI

ON-SITE TRAINING

Participant	Agency	Position	Hours
Mrs. Avenell Cunningham	Prentiss County Child Development Center	Director	24
Mrs. Drusand Hood	Ripley Child Development Center	Teacher	24
Lilia Spight	Ripley Child Development Center	Teacher	24
Barbara Everett	Tupelo Program for Severely/Profoundly Handicapped	Director	24
Baljit Dhaliwal	Tupelo Program for Severely/Profoundly Handicapped	Teacher	24
Opal Filgo	Tupelo Program for Severely/Profoundly Handicapped	Teacher Aide	24
Pearl Dooley	Tupelo Program for Severely/Profoundly Handicapped	Teacher Aide	24
Margaret Wood	Humphreys County Schools	Teacher	24
Janet Berry	Humphreys County Schools	Supervisor of Special Education	8

TABLE VI (cont.)

Participant	Agency	Position	Hours
Annie B. Simmons	Humphreys County Schools	Teacher	8
Curtis Ball	Humphreys County Schools	Teacher Aide	8
Margaret Wood	Humphreys County Schools	Teacher	8
Mary Meador	Humphreys County Schools	Teacher Aide	8
Dorothy Brock	Humphreys County Schools	Teacher Aide	8
Shirley Gowdy	215 Harpole Street Belzonia, MS	Parent	8
Mary Jones	Tunica County Schools	Teacher	8
Ruth Lewis	West Tallahatchie School	Special Education Teacher	24
Mary Lee Jefferson	West Tallahatchie School	Teacher	24
Marsha Bassett	West Tallahatchie School	Teacher	24
Ever Griffrin	West Tallahatchie School	Teacher Aide	24
Delores Mason	West Tallahatchie School	Teacher Aide	24
Jacqulyn Brady	West Tallahatchie School	Teacher Aide	24

COORDINATION STRATEGIES

Objectives: To develop coordination strategies with education, health, welfare, social, and related agencies providing assistance to preschool multiply handicapped children.

To serve as a research site for other First Chance projects who want to test instruments they have developed or to try new curriculum materials at this site.

Accomplishments: Coordination of services with others was an on-going process. The agencies with whom we worked assisted us in providing supplemental services for our students and we in turn cooperated with follow-up requests. State Department of Education staff were instrumental in initiating on-site training workshops and provided consultation on the development of the Program's Assessment/Curricula. The organizations we worked with provided us with an outlet for promoting early education for the handicapped.

(Appendix G contains a list of the agencies, organizations, and/or doctors with whom we had a close working relationship; this Appendix also contains letters from others we have worked with.)

During the first year of funding contact was made with several programs to offer the RUN facility as a research site. However, none wished to pursue the offer. WESTAR was contacted during the second year to help us contact interested agencies. They were to furnish RUN with a list of projects who wanted to use the program as a research site. However, a project was not found who wanted to take advantage of the offer.

ADVISORY COUNCIL

Objective: To initiate an advisory council for the Project which would be an active, functioning group providing expert information and serving as advocates for children enrolled in the early education program.

Accomplishments: At the present time, the Project has twelve (12) members on its advisory council. Ten (10) are professionals and two (2) are parents of children enrolled in the program. The advisory council met every two months until March, 1978. At this time, the members voted to meet every four months because most members lived long distances from the Center. However, it was stressed that any council member would be contacted by the Project at any time if information or recommendations were needed. Various members have given input into the operation of the program when called upon.

STAFF DEVELOPMENT

The original proposal nor the continuation proposals stipulated that the program would engage in staff development activities. However, this component was a vital part of the program. It is felt that the staff benefitted from all activities which were engaged in and all activities which were conducted. Comprehensive data of these activities are presented in Table VII. The data was collected for only the present staff members and covers the period from August 1, 1977 through August 31, 1979.

TABLE VII

STAFF DEVELOPMENT TRAINING ACTIVITIES

Type of Training	Hours	Provided by Staff	Received by Staff
In-Service Training	88½	XXXX	
In-Service Training	77		XXXX
Presentations (off campus)	5½	XXXX	
On-Site Visits	152½		XXXX
Conferences	244		XXXX
General Workshops	40	XXXX	
Workshops	367		XXXX
On-Site Training Workshops	63	XXXX	
College Credits	27		XXXX

The Project also began collecting books, manuals, booklets, etc. for use in broadening their knowledge on handicapping conditions and programming techniques. The collection now contains over 300 items.

EVALUATION

Objectives: To note any apparent differences in developmental progress between institutionalized and non-institutionalized severely handicapped children enrolled in the early education program.

To evaluate Project success in meeting objectives.

Accomplishments: A study was conducted by Dr. Walt Antonow, director of the diagnostic and evaluation team at the North Mississippi Retardation Center, in 1978-1979 to note any apparent differences in developmental progress between institutionalized and non-institutionalized children enrolled in the program. Data from the Adaptive Behavior Scale and Project Memphis were collected for a representative group of RUN children.

Project RUN clients were divided into two groups for the purpose of statistical analysis. Group 1 consisted of six (6) clients residing at home and attending Project RUN training (N=6). Group 2 consisted of clients residing at the North Mississippi Retardation Center and participating in Project RUN programming in addition to programming within the cottage of residence (N=8). A total of fourteen (14) clients participated in the research (N=14).

Analysis of Pre-Test Data: Group Comparisons

An analysis of variance statistical computation procedure (SPSS ANOVA) failed to reveal any statistically significant differences between Group 1 and Group 2 on the AAMD Adaptive Behavior Scale (ABS) Data or the Project Memphis Comprehension Development Scale (Memphis). Analysis was performed by domain on the ABS and by subscale on the Memphis.

Analysis of Post-Test Date: Group Comparisons

An analysis of variance procedure (SPSS ANOVA) failed to reveal any statistical differences between Group 1 and Group 2 on post-test data. These results indicate that if any developmental gains were evidenced, the gains were equivalent for both groups of clients.

Developmental Gains Assessment: AAMD Adaptive Behavior Scale

The AAMD Adaptive Scale was administered to all fourteen (14) clients twice, comprising the pre-test and initial post-test data. Time span between assessments was held at six months for all clients. Twelve of the clients were futher assessed six months after the initial post-testing.

The results of a two-tailed T-Test (SPSS T-test) failed to reveal any significant differences between pre- and initial post-test scores on ten (10) domains.

The results of a two-tailed T-test (SPSS T-test) conducted on pre-test data in comparison with the data from the second post-test administration (one year time span) did reveal a statistically significant difference on the domain of Independent Functioning on the ABS.

Inspection of the means (Table VIII) shows that the change was in the negative, apparently regressive, direction. It should be noted, however, that missing data, with twelve clients receiving the post-test while fourteen were pre-tested, most likely accounts for the difference in the negative direction. The SPSS program used does not compensate for missing data, attributing a value of zero to these data.

Developmental Gains Assessment: Project Memphis

The Project Memphis Comprehensive Development Scale was administered twice to the sample of 14 clients, with the pre- and post-test time span being six months. The results of a two-tailed T-test (SPSS T-test) failed to reveal statistically significant differences between the two groups of data on the following subscales of Project Memphis: Personal-Social; Fine-motor; Language; Perceptive-Cognitive. A significant difference, in the positive direction, was observed on the Gross-motor subscale. (Table IX)

Summary and Conclusion

A survey of the items appearing on the AAMD Adaptive Behavior Scale reveals that these items do not sample a sufficient number of lower level skills. The consequence being that small changes in adaptive behavior are not measurable with the ABS. The ABS, therefore, appears to be an inappropriate measurement tool for a multiply handicapped, pre-school population.

Item analysis of the Project Memphis Scale presents a situation similar to that of the above. Gains made may go unnoticed due to the grossness of the scale and inapplicability, to this population, of some of the subscales. The statistically significant difference between pre-test and post-test difference on the Gross-motor subscale was noted, however. This difference may be due to maturation alone, however, and the results should be interpreted with caution. The apparent evidence that the client's condition has, at the minimum, been stabilized may account for the efficacy of programming for the multiply handicapped, severely retarded, population.

TABLE VIII

AAMD Adaptive Behavior Scale

	Pre-Test		Post-Test 1		Post-Test 2	
	Mean	SD	Mean	SD	Mean	SD
Independent Functioning	16.9	7.0	18.4	10.2	12.4	7.9
Physical Development	8.3	4.3	9.5	4.2	8.3	4.9
Economic Activity	0.0	0.0	0.1	0.3	0.0	0.0
Language Development	7.1	5.8	8.9	5.5	6.6	5.7
Numbers & Time	0.5	1.4	0.4	1.1	0.2	0.8
Domestic Activity	0.0	0.0	0.1	0.3	0.0	0.0
Vocational Activity	0.0	0.0	0.0	0.0	0.0	0.0
Self-Direction	5.7	5.0	7.8	6.1	4.8	5.5
Responsibility	0.4	0.9	0.1	0.5	0.0	0.0
Socialization	9.1	6.1	10.7	7.6	8.5	7.9

TABLE IX

Project Memphis Developmental Scale

	Pre-Test		Post-Test		T Value
	Mean	SD	Mean	SD	
Personal-Social	15.14	8.80	18.50	10.93	2.80
Gross-Motor	5.14	3.90	7.14	4.35	5.75*
Fine-Motor	7.57	5.20	8.57	4.07	1.34
Language	12.50	12.30	15.36	13.33	1.38
Perceptive-Cognitive	10.86	10.41	14.50	11.20	2.11

*Statistically significant at the .05 level of confidence.

All objectives for the Project were successfully completed except for the objective for serving as a research site for other First Chance projects who may have wanted to test instruments they had developed or to try new curriculum material at this site. The circumstances for not meeting this objective are described in Coordination Strategies.

In addition to meeting the objectives as outlined within the final progress report, the parents of the community students were asked to respond to an evaluation of the total program. Thirteen (13) parents responded to the twnety-five (25) question evaluation. Four of the parents responding did not participate in the parent involvement activities offered by the parent educator because of work schedules. The results of the evaluation indicated that all parents felt the Project had provided effective services. (The results of the responses have been tabulated and are contained in Appendix H.)

A study will be conducted from September through December, 1979 to determine the effectiveness of the educational model. Dr. Andrew Hayes, University of North Carolina at Wilmington, will act as the consultant for this study. The research data will be disseminated to other BEH projects and other agencies providing direct services to children.

A questionnaire was sent to all recipients of the Early Education Assessment/Curriculum for Serving the Severely/Profoundly Multiply Handicapped in December, 1978. Responses indicated that five (5) Mississippi school systems, the O'Berry Center in North Carolina, and a Nashville, Tennessee school were using the Assessment/Curriculum. A total of 138 students were being served. Responses also indicated that thirty (30) school systems were using the products as resource material for programming.

Two Mississippi university departments of special education were using the program for method courses.

The techniques and procedures contained in the program received a count of eighteen (18) excellent, thirteen (13) good, none (0) fair, none (0) poor, and eight (8) no reply.

A questionnaire was sent to the Handicapped Children's Early Education programs and other direct service agencies who received the Parent Involvement and Training manual in July, 1979. The responses from the questionnaire indicated that the booklet did provide the kind of information that was helpful to other programs with a parent component, and that the booklet would be used as a resource material. The majority of responses also said that Project RUN's parent component was explained clearly and that the sample forms were helpful.

In addition, the questionnaire asked the programs to rate the information contained in the booklet as excellent, good, fair, or poor. The following are the percentages for each response;

Excellent	Good	Fair	Poor
38%	44%	12%	6%

SPINOFFS

CONSORTIUM. The RUN director was involved in the formation of the Mississippi Early Services for the Handicapped Consortium (MESH) in 1978. The objectives of the consortium are: (1) to increase communication and coordination between agencies and organizations who work with young handicapped children to insure the most efficient utilization of resources available, (2) to increase public and professional awareness of the need of early intervention in promoting the optimal development of young handicapped children, (3) to develop a system to share information among consortium members.

At the present time all BEH Handicapped Children's Early Education Program staff and staff from the State Department of Education, University Affiliated Program, Friends of Children of Mississippi, and State Division of Mental Retardation are members. These members are in the process of compiling a resource directory containing all programs and organizations in Mississippi serving the young handicapped child. Plans are also being made for public awareness conferences.

OTHER MATTERS

OUTREACH - The program received Outreach funding for one year, September 1, 1979 through August 31, 1980.

JDRP - Carolyn Smith, BEH Project Officer recommended that RUN be considered for JDRP validation. The director attended a Joint Dissemination Review Panel workshop sponsored by WESTAR in November, 1978. Since this time, WESTAR has provided the Project a consultant to review the Project's programming techniques and procedures and educational achievement data. This review, conducted by Dr. Andrew Hayes, indicated that the feasibility of RUN being considered for JDRP validation was feasible. Arrangements have been made with Dr. Hayes to help the Project in its effort to compile a submission for prereview by the Bureau of Education for the Handicapped.

WESTAR - The technical assistance provided by WESTAR was an invaluable asset in the Project's effort in meeting objectives.

BEH - As a result of the support and cooperation given the Project by Carolyn Smith and other BEH staff, the Project continued to expand in meeting the needs of handicapped children and their families.

APPENDIX A

ENROLLMENT DATA

Child and Birthdate	Sex	Date Entered	Handicapping Conditions	Direct Services	Other Services	Date Exited	Placement Obtained
Comm. 1 1-11-70	F	3-4-77	Cerebral Palsy, Mental Retardation	Special Education, Physical Therapy, Communications,	Parent Involvement and Training Program, Provide transportation to U. T. Rehabilitation Engineering Program,	8-1-79	Tupelo Multiply Handicapped Class
					appointment, Acquire funding for adaptive equipment and seating system, Arrange for transportation to RUN		
Comm. 2 8-28-74	M	3-4-77	Neuromotor Disorder, Visually Impaired, Seizure Disorder	Physical Therapy, Communications, Feeding		9-2-77	Learning Disabilitie Pre-school in Memphis
Comm. 3 3-8-73	F	3-4-77	Cerebral Palsy, Mental Retardation	Special Education, Physical Therapy, Communications, Feeding	Parent Involvement and Training Program, Medical referral	12-15-77	Oxford Child Developmental Center
Comm. 4 8-71	M	3-4-77	Seizure Disorder, Cerebral Palsy, Mental Retardation, Aphasia	Special Education, Physical Therapy, Communications, Feeding	Parent Involvement and Training Program	7-6-78	South Panola Child Developmental Center
Comm. 5 5-7-70	M	3-4-77	Cerebral Palsy, Central nervous insufficiency, Microcephaly, Mental Retardation, Seizure Disorder	Special Education, Physical Therapy, Communications, Feeding	Parent Involvement and Training Program, Provide transportation to U. T. Rehabilitation Engineering Clinic,	12-1-78	South Panola Child Developmental Center
					Medical referral		

ENROLLMENT DATA

Child and Birthdate	Sex	Date Entered	Handicapping Conditions	Direct Services	Other Services	Date Exited	Placement Obtained
Center 6 8-25-69	M	5-16-77	Cerebral Palsy, Mental Retardation, Visual Impairment, Seizure Disorder	Special Education, Physical Therapy, Communications, Feeding			
Center 7 4-30-68	M	5-18-77	Cerebral Palsy, Mental Retardation, Seizure Disorder	Special Education, Physical Therapy, Communications, Feeding	Referral to Crippled Children's, Transportation to University Kindergarten	3-21-79	Crippled Children's Hospital
Center 8 9-2-69	M	5-23-77	Cerebral Palsy, Mental Retardation, Seizure Disorder	Special Education, Physical Therapy, Communications, Feeding	Referral to U. T. Rehabilitation Engineering Program	4-2-79	North Mississippi Retardation Center Developmental Class (Woodlea)
Center 9 1-10-70	M	5-25-77	Mental Retardation, Cerebral Palsy, Seizure Disorder	Special Education, Physical Therapy, Communications, Feeding	Referral to U. T. Rehabilitation Engineering Program		
Center 10 5-22-69	F	5-25-77	Cerebral Palsy, Mental Retardation, Seizure Disorder, Hydrocephaly	Special Education, Physical Therapy, Communications, Feeding	Referral to U. T. Rehabilitation Engineering Program		
Comm. 11 1-7-75	M	10-3-77	Cerebral Palsy, Hypoglycemic	Special Education, Physcial Therapy, Communications, Feeding	Parent Involvement and Training Program, Referral to Crippled Children's	4-16-79	Crippled Children's Hospital

ENROLLMENT DATA

Child and Birthdate	Sex	Date Entered	Handicapping Conditions	Direct Services	Other Services	Date Exited	Placement Obtained
Comm. 12 10-18-75	M	10-3-77	Cerebral Palsy, Mental Retardation,	Special Education, Physical Therapy, Communications, Feeding	Parent Involvement and Training Program, Referral to U. T. Rehabilitation and Engineering Program		
Center 13 12-19-68	M	1-3-78	Cerebral Palsy, Mental Retardation, Seizure Disorder, Microcephaly	Special Educations, Physical Therapy, Communications, Feeding	Referral to U. T. Rehabilitation Engineering Program		
Center 14 7-7-74	F	1-3-78	Reye Syndrome, Cerebral Palsy, Blind, Mental Retardation, Convulsive Disorder	Special Education, Physical Therapy	Referral to U. T. Rehabilitation Engineering Program		
Center 15 4-20-71	M	1-3-78	Cerebral Palsy, Mental Retardation, Seizure Disorder, Microcephaly	Special Education, Physical Therapy, Feeding	Referral to U. T. Rehabilitation Engineering Program		
Center 16 11-3-72	M	1-30-78	Mental Retardation, Cerebral Palsy,	Special Education, Physical Therapy, Communications, Feeding	Medical referral		
Comm. 17 10-23-75	F	1-31-78	Cerebral Palsy, Mental Retardation, Microcephaly	Special Education, Physical Therapy, Communications, Feeding	Parent Involvement and Training Program, Referral to Crippled Children's, Medical referral		

ENROLLMENT DATA

Child and Birthdate	Sex	Date Entered	Handicapping Conditions	Direct Services	Other Services	Date Exited	Placement Obtained
Comm. 18 2-14-76	M	2-28-78	Cerebral Palsy, Mental Retardation	Special Education, Physical Therapy, Communications, Feeding	Parent Involvement and Training Program, Referral to Crippled Children's, Referral to South Panola Child Development Center		
Comm. 19 4-29-76	F	7-24-78	Cerebral Palsy, Mental Retardation, Seizure Disorder, Microcephaly	Special Education, Physical Therapy, Communications	Parent Involvement and Training Program, Referral to Crippled Children's, Referral to nutritional program, Referral to South Panola Child Development Center	7-31-79	South Panola Child Developmental Center
Comm. 20 3-31-77	M	9-11-78	Cerebral Palsy, Mental Retardation	Special Education, Physical Therapy, Communications	Parent Involvement and Training Program, Medical referral, Referral to Crippled Children's, Order seating system		
Comm. 21 3-4-78	M	9-27-78	Down's Syndrome, Mental Retardation	Special Education, Physical Therapy	Locate and refer child to programs in Baton Rouge, Louisiana	5-16-79	

ENROLLMENT DATA

Child and Birthdate	Sex	Date Entered	Handicapping Conditions	Direct Services	Other Services	Date Exited	Placement Obtained
Comm. 22 5-9-78	M	11-1-78	Down's Syndrome, Mental Retardation	Special Education, Physical Therapy	Seating system order information		
Comm. 23 4-17-78	M	2-5-79	Cerebral Palsy, Seizure Disorder, Respiratory Distress Syndrome	Special Education, Physical Therapy	Parent Involvement and Training Program, Referral to Crippled Children's, Order seating system		
Comm. 24 11-30-75	M	4-16-79	Spina Bifida (paralyzed), Hydrocephaly, Mental Retardation, Seizure Disorder	Special Education, Physical Therapy			
Comm. 25 9-6-78	M	5-23-79	Down's Syndrome, Mental Retardation	Special Education, Physical Therapy			
Comm. 26 11-5-77	F	6-13-79	Down's Syndrome, Mental Retardation	Special Education, Physical Therapy			
Comm. 27 11-2-78	F	7-19-79	Cerebral Palsy, Mental Retardation, Seizure Disorder, Microcephaly, Larynomalacia, Chalasia	Special Education, Physical Therapy	Parent Involvement and Training Program		

APPENDIX B

FAMILY PARTICIPATION

[illegible]MILY MEMBER Mrs. Doe STUDENT'S NAME John Doe

DATE 10/3/77	Classroom observation Feeding Program	STAFF CONTACT entire Speech Pathologist
DATE 10/4/77	Classroom observation; administer physical therapy Meeting - explanation of program, appointment	STAFF CONTACT Entire Parent Educator
DATE 10/6/77	Classroom observation; administer physical therapy and oral stimulation Signed out Listen to Your Heart from RUN library	STAFF CONTACT Entire Speech Pathologist Parent Educator
DATE 10[illegible]/77	Classroom observation Feeding Program	STAFF CONTACT Entire Speech Pathologist
DATE 0/12/77	Home visit	STAFF CONTACT Parent Educator Special Educator
DATE 0/19/77	Home visit - lessons plans for localizing sound and reaching Form for parent meeting interests	STAFF CONTACT Parent Educator
DATE 0/20/77	Classroom observation	STAFF CONTACT Entire
D[illegible] 0/24/77	Classroom observation	STAFF CONTACT Parent Educator

DATE /25/77	Classroom observation Feeding Physical Therapy	STAFF CONTACT Entire Speech Pathologist Physical Therap[illegible]
DATE /28/77	Classroom observation	STAFF CONTACT Entire
DATE /31/77	Halloween Party	STAFF CONTACT Entire
DATE /1/77	Classroom observation Physical Therapy	STAFF CONTACT Entire Physical Therapist
DATE /7/77	Classroom observation Feeding Called Les Passee for eye exam Check on travel	STAFF CONTACT Entire Speech Patholog[illegible] Parent Educator
DATE /8/77	Classroom observation Physical Therapy	STAFF CONTACT Entire Physical Therapist
DATE /10/77	Classroom observation Film - "Hewitt"	STAFF CONTACT Entire Parent Educator
TE 4/77	Took to Crippled Children's to get new chair	STAFF CONTACT Parent Educator
E 5/77	Classroom observation Video taping with new chair	STAFF CONTACT Entire

FAMILY PARTICIPATION

FAMILY MEMBER Mrs. Doe STUDENT'S NAME John Doe

TE 11/16/77	Home Visit Left lessons for discriminating between sounds, holding objects, grasping, and searching for sounds with eyes. Also discussed SSI, and chair situation.	STAFF CONTACT Parent Educator
TE 12/5/77	Classroom Observation Feeding Given article "Pre-school Primer for Parents" Called UT - Genetics Department about appointment	STAFF CONTACT Entire Speech Therapist Parent Educator
TE 12/6/77	Classroom	STAFF CONTACT Entire
TE 12/8/77	Classroom Observation	STAFF CONTACT Entire
TE 12/12/77	Christmas Party	STAFF CONTACT Entire
TE 12/14/77	Home Visit Left lessons for localizing sound, holding objects and bringing arms to midline Filled out Needs Assessment and Sharing Ideas Forms	STAFF CONTACT Parent Educator
TE 1[illegible]5/77	Classroom Given bath aid Pictures taken to send to Rehabilitation Center about chair	STAFF CONTACT Entire Parent Educator Physical Therapist

		STAFF CONTACT
/3/78	Classroom Observation Feeding - p.m.	Entire
E		STAFF CONTACT
/10/78	I called about John being ill - measles	Parent Educator
/18/78	I called about Birthday party	
E		STAFF CONTACT
/31/78	Classroom Feeding - p.m.	Entire Parent Educator
E		STAFF CONTACT
/2/78	Took John to LeBonheur for doctor's appointment	Parent Educator
/6/78	Classroom Feeding - p.m.	Entire
E		STAFF CONTACT
/7/78	Classroom Parents meeting	Parent Educator
/8/78	Home Visit Lessons for grasping and holding rattle Olfactory and Gustatroy stimulation activities	Parent Educator
E		STAFF CONTACT
/9/78	Classroom Feeding - p.m.	Entire
/13/78	Classroom	
E		STAFF CONTACT
/14/78	Classroom Feeding - p.m.	Entire
/16/78	Classroom Feeding - p.m.	
E		STAFF CONTACT
/22/78	Mrs. Doe called Parent Educator and said she was ill	Parent Educator
/27/78	Classroom Feeding - p.m.	Entire

FAMILY PARTICIPATION

FAMILY MEMBER Mrs. Doe STUDENT'S NAME John Doe

TE		STAFF CONTACT
3/7/78	Parent Educator called Mrs. Doe and found that she and John were still ill.	Parent Educator
3/20/78	Classroom Feeding - p.m.	Entire
TE		STAFF CONTACT
3/27/78	Classroom Feeding - p.m.	Parent Educator
3/28/78	Classroom	Entire
TE		STAFF CONTACT
4/3/78	Classroom	Entire
4/4/78	Classroom	
TE		STAFF CONTACT
4/5/78	Home Visit Olfactory and sensory stimulation activities	Parent Educator
4/6/78	Classroom Feeding - p.m.	Entire
TE		STAFF CONTACT
4/10/78	Classroom	Entire
4/13/78	Classroom	Parent Educator
4/18/78	Called - John sick, went to doctor on April 17	Entire
4/25/78	Classroom	
TE		STAFF CONTACT
5/9/78	Classroom	Entire
5/15/78	Classroom Feeding - p.m.	
E		STAFF CONTACT
5/23/78	Mrs. Doe called and said John was sick. Called May 23, 1978	Parent Educator
5/24/78	I called Mrs. Doe to see how John was doing	

		STAFF CONTACT
25/78	Parent Meeting	Parent Educator
	Birthday party	Entire
5/30/78	Called but Mrs. Doe is sick. She will not be able to do home visit on May 31, 1978.	Parent Educat
TE		STAFF CONTACT
5/31/78	Home Visit Mrs. Doe was sick, was unable to make home visit	Parent Educator
6/1/78	Called to tell Mrs. Doe that there is no school	Parent Educator
TE		STAFF CONTACT
/6/78	Physical Therapy - Classroom Group Activities	Entire
/12/78	Classroom Feeding - p.m.	Entire
TE		STAFF CONTACT
/13/78	Classroom Feeding - p.m.	Entire
TE		STAFF CONTACT
/14/78	Home Visit Left lessons on oral exercises Tactile and sensory stimulation Mrs. Doe also filled out the Parent's Need Assessment form and the Parent Sharing of Ideas.	Parent Educator
TE		STAFF CONTACT
/15/78	Classroom Feeding - p.m.	Entire
/19/78	Classroom	Entire
E		STAFF CONTACT
/20/78	Classroom Feeding - p.m.	Entire
/26/78	Classroom Feeding - p.m.	Entire
6/27/78	Classroom Feeding - p.m.	STAFF CONTACT
/29/78	Classroom Feeding - p.m.	Entire
/11/78	Classroom Feeding - p.m.	

FAMILY PARTICIPATION

AMILY MEMBER Mrs. Doe STUDENT'S NAME John Doe

TE		STAFF CONTACT
7/12/78	Home Visit Left lessons for oral exercises and tactile stimulation. Also, left notebook for Mrs. Doe to record any new activities of John's.	Parent Educator
TE		STAFF CONTACT
7/20/78	Mrs. Doe called and said she would not be able to attend school today	Parent Educator
TE		STAFF CONTACT
7/24/78	Classroom Feeding - p.m.	Entire
7/25/78	Classroom	Entire
TE		STAFF CONTACT
7/26/78	Parent Contact - Took Mrs. Doe and John to the University of Tennessee Rehabilitation Center to check on his wheel chair	Parent Educator
TE		STAFF CONTACT
7/27/78	Called Mrs. Doe and told her there will be no school today	Parent Educator
7/31/78	Classroom Feeding - p.m. Parent Meeting	Entire Parent Educator
TE		STAFF CONTACT
8/3/78	Classroom	Entire
8/9/78	Home Visit Left lessons for visual and sensory stimulation exercises and oral exercises. We discussed the Batesville Child Development Center	Parent Educator
TE		STAFF CONTACT
8/14/78 to 8/25/78	Summer Vacation	

IE		STAFF CONTACT
8/29/78	Provided transportation to U.T. Rehabilitation	Parent Educator
8/31/78	Classroom	Entire

ATE		STAFF CONTACT
9/6/78	Home Visit Left lessons for oral exercises and grasping	Parent Educator
9/14/78	Classroom Feeding - p.m. (evaluation)	Entire Speech Pathologist
9/18/78	Classroom	

TE		STAFF CONTACT
9/19/78	Classroom	Entire
9/20/78	Home Visit Left lessons for oral stimulation, grasping, and Olfactory stimulation activities	Parent Educator
9/26/78	Classroom	Entire

TE		STAFF CONTACT
10/18/78	Home visit - left feeding objectives	Parent Educator
10/30/78	Classroom	Entire
10/31/78	Halloween Party	

TE		STAFF CONTACT
11/1/78	Home Visit - continuation of feeding objectives	Parent Educator
11/2/78	Classroom	
11/20/78	Classroom	Entire
11/21/78	Classroom	

ATE		STAFF CONTACT
11/28/78	Classroom	Entire
11/29/78	Home Visit - left lessons for auditory discrimination (Levels I and II)	Parent Educator
11/30/78	Classroom	Entire

TE		STAFF CONTACT

IE		STAFF CONTACT

PROJECT "RUN"

PARENT - HOME CONTACT

NAME Lisa Romine, Parent Educator

CHILD'S NAME John Doe

ATE REASON

/4/77 PARENT CONTACT—I met with Mrs. Doe to discuss my position and services. I explained the home training program, but Mrs. Doe is not interested in a weekly visit. She said every other week would be better for her because she feels she can carry over training in her home herself. She did express an interest in my helping her with other social agencies and helping her get more information about John's particular handicapping condition. Mrs. Doe also said she would enjoy films and speakers. We tentatively set up Wednesday's at 3:00 p.m. for my visits, and she gave me directions to her home.

/6/77 PARENT CONTACT—I met with Mrs. Doe and gave her the book Listen to Your Heart to read. We discussed the scheduling of home visits for every two weeks. I told Mrs. Doe that I had asked Dr. Kellum, staff doctor of NMRC, about Medicaid's policy on paying for combination drugs as she had inquired. He informed me that Medicaid's policy is not to pay for combination drugs; only single ones. Dr. Kellum said Medicaid would pay for the drug if the physician wrote two separate prescriptions. Mrs. Doe said she would talk to her physician about this at her next appointment. Mrs. Doe asked me to find out if the program could provide transportation for her and John to Memphis when he had a doctor's appointment. I told her I would find out for her.

/12/77 HOME VISIT--I made a visit to the home of John Doe. Accompanying me was Kathy Sewell, Special Educator. I asked Mrs. Doe to fill out a Parent's Need Assessment and Parent's Sharing of Ideas form. From this interview, it was evident that Mrs. Doe is happy with the program. She thinks that John has advanced in eating skills and is more alert. She would like John to be seen by a physical therapist to see if he is doing any better. Mrs. Doe would like more information about John's condition, and does not always understand why other people can not understand John's condition. Mrs. Doe likes the program because it gives her a chance to get out of the house and be with people who understand John's condition. Mrs. Doe would come once a month to a parent meeting.

DATE	REASON
/19/77	HOME VISIT—On my visit today, I left prescriptions with Mrs. Doe on localizing sound and gripping an object. I also left a bell for Mrs. Doe to use with John. Mrs. Doe completed a Parent Meeting Interest form and said she would participate in any type of gathering. Mrs. Doe asked me if I knew when John's chair would be coming from Crippled Children's, since they went up there on August 23. I told her that Jeanine Johnson, O.T.R., said that it would probably be another month. Mrs. Doe's next appointment in Memphis is November 29 to discuss the genetic work-up done August 29.
/2/77	HOME VISIT——No visit was made today due to Mrs. Doe having other plans.
/16/77	HOME VISIT—Today I left prescriptions for grasping, holding, localizing sound, and discriminating sounds with Mrs. Doe. I also took Mrs. Doe John's new chair back to use at home as well as at school. I asked Mrs. Doe to have John sit in the chair for at least thirty minutes at a time. John is adjusting to the chair very well, and it does not seem to be causing any red spots. Mrs. Doe and I discussed the need for another means of transporting John that is not so heavy or large. I am going to look into getting another canvas for the chair base. Mrs. Doe has John's harness and extra strap. I suggested that Mrs. Doe use the stra as a shoulder restraint so that the M.P.I. would be used as a car seat without the tray. We also discussed Mrs. Doe's SSI pahyment. Mrs. Doe receives approximately $53.00 per month in SSI and $200.00 in child support. This is the extent of her income. I am going to try and get some information about the SSI payment scale for Mrs. Doe.
/25/77	PARENT CONTACT—I called Mrs. Doe to see if I could pick up John's new chair to take back to the UT Rehabilitation Clinic for repairs. She said that would be fine. I told her I would be bringing another type of chair for her to use while this one is being repaired. Mrs. Doe asked me to find out about getting another canvas for her own base, too. Mrs. Doe also told me that John was sitting in his chair without his tray being attached. Mrs. Doe said she and John were feeling better, and would be here on Monday, but not Tuesday. Tuesday, November 29, Mrs. Doe has a review of John's neurological work-up in Memphis at Variety Child Development Center.

PROJECT "RUN"

PARENT - HOME CONTACT

NAME Lisa Romine, Parent Educator

CHILD'S NAME John Doe

DATE REASON

2/14/77 HOME VISIT - I left lessons for localizing sound with eyes and head, bringing arms to midline and holding an object. While I was there, John was observed to fall to the left continuously in his new chair. Mrs. Doe said that John had been doing this a lot lately. I told her I would get in contact with Minna Ulmer and Elaine Treflor about this. I also told Mrs. Doe that Minna Ulmer was picking up John's bath aid this week. Mrs. Doe filled out the Parent's Sharing of Ideas and Need Assessment Forms. From these forms, it was evident that Mrs. Doe is happy with the program. She said that she is very pleased that Minna Ulmer has seen John more in the last two months. Mrs. Doe said that the parent program has aided her by making appointments, offering transportation, giving instructions for home training, and has given her someone she can rely on to talk to about John. Mrs. Doe does feel she needs to participate in the feeding program more than once a week. She feels this is one of the few places John can progress, but that she does need extra help. Mr. Doe is realistic in assessing John's abilities and potential. She just wants him to have the chance for programming that could benefit him in any way. Mrs. Doe also said that it is a big help for one of the boys to get John out of the car for her, and she appreciated it.

2/15/77 PARENT CONTACT - I gave Mrs. Doe the bath aid Minna Ulmer had picked up at the Rehabilitation Engineering Clinic. We also took pictures of John in his chair to send Elaine Treflor at the Center. Minna Ulmer included a letter stating John's problems with the chair and asked Ms. Treflor to call about possible adaptations.

/8/78 HOME VISIT - I left lessons for holding a rattle and grasping with palms and fingers and opposing thumbs. I also left suggested activities for olfactory and gustatory stimulation. We discussed John's MPI chair, and Mrs. Doe will definitely have John at the Center on February 13, so that Elaine Treflor can see him. John has an opthomological exam scheduled for February 15, 1978, at Les Passes. Suzanne Flowers, social work practicum student, accompanied me on this visit.

DATE	REASON
2/9/78	PARENT CONTACT - I met with Mrs. Doe to go over John's I.E.P. Mrs. Doe approved of the programs.
3/78	HOME VISIT - I was unable to make any visits due to family illnesses.
/5/78	HOME VISIT - Today, I left lessons for olfactory and other sensory stimulation. Mrs. Doe had eight containers filled with different ingredients to use with John. Mrs. Doe also had various brushes to use for tactile stimulation. I told Mrs. Doe about making a textured block, and she said she would try one. John was sitting up so much better today and even pulled himself up without use of the tray.
/14/78	HOME VISIT - I left lessons for oral exercises and tactile sensory stimulation. Mrs. Doe had made an excellent texture cube to use for the tactile stimulation. While I was there, John seemed to be in a very good mood. Mrs. Doe also filled out the Parent's Need and Sharing of Ideas forms. From the forms, Mrs. Doe expressed a great desire for her child to be in Project RUN. Mrs. Doe said that the parent program has aided her by having group meetings, individual conference between parents and staff and visits to the home by staff. She said that Project RUN has given her a new outlook on John's handicapping condition and felt that this is one of the few places John can progress. Mrs. Doe is realistic in assessing John's abilities and potential. Also, Mrs. Doe would like some more information about John's conditions. Accompanying me was Mary Napier, Social Work Practicum student.
/12/78	HOME VISIT - Today, I left lessons for oral exercises and tactile stimulation. While I was there, John was very alert. I also left a notebook for Mrs. Doe to record any new activities of John. Mrs. Doe requested some new visual motor exercises to strengthen John's eyes. I told Mrs. Doe that I would reschedule John for an appointment at U.T. Rehabilitation and Engineering Clinic tomorrow and inform her of the date. Accompanying me was Mary Napier, Social Work Practicum student.
/9/78	HOME VISIT - I left lessons today for visual and sensory stimulation and oral exercises. John went for his check-up yesterday at Dr. Jabbours. His medication remained the same, and he will return in six months. Mrs. Doe and I also discuss the Batesville Child Development Center. She told me that she was going to view their program on Friday. Mrs. Doe said she had no desire to enroll John in this program, unless she felt it met all his needs. She did mention that it would be

PROJECT "RUN"

PARENT - HOME CONTACT

NAME Lisa Romine

CHILD'S NAME John Doe

DATE REASON

much more convenient for her due to John's increased weight and her inability to carry him. She told me that she would discuss her visit with me after they return from vacation.

9/6/78 HOME VISIT - I left lessons today for oral exercises and grasping. Mrs. Doe had been unable to complete the previous lessons due to John's illness. So, I again left the visual stimulation activity. Mrs. Doe and I discussed the Batesville Child Development Center Program. She has decided to enroll John in the program and has made the necessary application. Mrs. Doe said that she does not know when she will start. The center said they will contact her. Until that time, John will continue with Project RUN. Mrs. Doe feels that this program will meet John's needs and hers as well. Mrs. Doe asked me to check and see if John is still on the holding list for the North Mississippi Retardation Center.

9/20/78 HOME VISIT - I made the visit to demonstrate oral stimulation, grasping, and olfactory stimulation. I told Mrs. Doe to continue these activities. I told her that John was on the holding list at the North Mississippi Retardation Center but would not be put on the waiting list until she notified them. I also told Mrs. Doe that I would call the Child Development Center to see if they need any information on John. Melanie Moore, Social Work Practicum student, assisted me on the visit.

0/18/78 HOME VISIT - The purpose of my visit to John was to demonstrate feeding objectives. Last weeks activities were partially completed with no continuation of activities left. I told Mrs. Doe that I would check on the swivel chair for the car. Mrs. Doe told me that she and John will be coming to RUN until she is notified by the Batesville Child Development Center. Mrs. Doe filled out the Needs Assessment and Parent Sharing of Ideas while I was there. Also, Mrs. Doe felt the parent program aided her by helping with transportation, helping her to help John and giving her

REASON

someone to talk to. Mrs. Doe also said John's program has helped him with feeding, education, and to be more alert. She said the parent/staff meetings have been helpful in giving her ideas and information. Mrs. Doe felt John had many phys[illegible] limitations to overcome in life, and he needed especially to improve head control. Practicum student, Melanie Moore accompanied me on the visit.

/1/78 HOME VISIT - I made the visit to again demonstrate the feeding objectives. These activities were not accomplished last week and were left to be continued. Mrs. Doe said that she needs the screw from John's chair that holds on his foot pods. Mrs. Doe said that she still has not heard from the Welfare Department about an appointment, and she has not heard any more from the Child Development Center. Social Work Practicum student, Melanie Moore accompanied me on the visit.

/29/78 HOME VISIT - The purpose of my home visit was to demonstrate auditory discrimination (Level I and II). Last weeks feeding activities were only partially completed and there were no activities to be continued. Mrs. Doe heard from the Welfare Department and they said she has been approved for services at the Batesville Center and should be hearing from them soon. Practicum student Melanie Moore accompanied me on the visit.

/30/78 PARENT CONTACT - Mrs. Doe called to tell me that she had received a letter from the Child Development Center today stating that John was to start December 4th. Mrs. Doe said that she thought that she would take him. She asked that I call her next week so that she could tell me how she liked the new center.

17-79 PARENT CONTACT (follow-up) - I stopped by the Doe's to see how John was doing. Mrs. Doe said that John seems to like going to the Batesville Center and that she is enjoying him going too.

14-79 PARENT CONTACT (follow-up) - I stopped by to show Mrs. Doe the Christmas pictures so that she could order one. She said that they're doing fine and she is satisfied with John's new program.

8-79 PARENT CONTACT (follow-up) - I went by the Doe's to give Mrs. Doe her group picture and to follow-up on John. Mrs. Doe said that John goes to school a lot more now and isn't out sick as much as he was when he was in Project RUN. Everything seems to be going fine at this point.

PROJECT "RUN"

PARENT - HOME CONTACT

NAME Lisa Romine

CHILD'S NAME John Doe

DATE	REASON
25-79	PARENT CONTACT (follow-up) - I made a visit today to follow-up on John and inquire about his adaptive wheel chair. Mrs. Doe informed me that a local club was going to purchase John a new chair and they would get it sometime within the next three months. Mrs. Doe is very pleased about this. However, Mrs. Doe did mention that she was not as happy with John's program at the Batesville Child Development Center since he was not receiving any physical therapy. Mrs. Doe said she felt John was tighter now than he had ever been. I suggested that she ask Mr. Dearmon about John's physical therapy program.
-9-79	PARENT CONTACT (follow-up) - On my visit today, Mrs. Doe told me that she had already taken John to U. T. Rehabilitation Clinic to be fitted for his new chair. She said that the sheel chair base is being ordered by a doctor at the Batesville Hospital, and that the club was paying for everything. Also, while I was there, Mrs. Doe told me that she was very upset with the Batesville Center. She said that they told her that their program was not benefitting John and that it would be better if she institutionalized him. Mrs. Doe asked about physical therapy services at North Mississippi Retardation Center and I told her of the alternatives. Mrs. Doe said that she wanted John either to continue at the center as was her right under P. L. 94-142 or have them pay for services outside the community. And, she said she would not consider institutional placement until she was no longer able to care for John. Mrs. Doe asked me to get her some more information on P. L. 94-142. I also suggested that John be re-evaluated by the Diagnostic and Evaluation Team, and so Mrs. Doe asked me to arrange a date. Practicum student Sherry Swearengen accompanied me on this visit.
-18-79	PARENT CONTACT (follow-up) - I stopped by Mrs. Doe's today to check on John. He is doing fine and is going to the Batesville program for the summer. Mrs. Doe said it was just day care though. John's new wheelchair had arrived, so I picked up the one we had loaned him. Practicum student Sherry Swearengen accompained me.

PROJECT "RUN"

SUPPLEMENTARY SERVICES CONTACT

NAME Lisa Romine - Parent Educator

CHILD'S NAME John Doe

DATE	REASON
11/7/77	I called Les Passees Rehabilitation Center for Mrs. Doe to see about an opthamology exam for John. I spoke with Ms. Terri Jones, Appointment Secretary, and she said it would be fine for Mrs. Doe to bring John to Les Passees for the exam. The doctor comes once a month, but will see clients at his private office. She said Mrs. Doe could come November 9, but Mrs. Doe said that was too soon. Ms. Jones said she would send an appointment card for the next visit which could be in December or January.
1[illegible]4/77	I transported Mrs. Doe and John to the Rehabilitation Clinic in Memphis to pick up John's new chair. John received the modular unit purchased by Project RUN. Upon leaving, Elaine Treflor, Physical Therapist, informed us that if anything should be wrong with the chair, they will repair it upon request.
11/17/77	Teresa Ellis called Elaine Treflor to inform her of a crack in John's new chair. Ms. Treflor said to either bring the chair to them or send it U.P.S. to be repaired.
11/30/77	I took John's M.P.I. back to the U.T. Rehabilitation Engineering Clinic for repairs. They were able to mend the chair and send it back. Elaine Treflor, Physical Therapist, said that she should have a bath aid for Mrs. Doe soon.
12/5/77	I called U.T.'s Genetic Clinic for Mrs. Doe about John's test results. I spoke to Susan Arone and asked if the results could be sent in a letter for Mrs. Doe since it is difficult for her to get to Memphis. Also, I asked if another appointment for John was required. She said she would speak to Dr. Wilroy about this and send some response in a letter to Mrs. Doe.

DATE	REASON
2/12/77	Mrs. Doe informed me that she has received a letter from Dr. Wilroy and John's test results. There was no mention of another appointment.
30/78	I called LeBonheur Children's Hospital so that Mrs. Doe could change the time of her appointment with Dr. Jabbour. This would allow time for John to have an EEG, too, since he has had six seizures in the last two months.
2/78	I provided transportation for Mrs. Doe and John to LeBonheur Children's Hospital, and their appointment with Dr. Jabbour, Neurologist. Dr. Jabbour prescribed new medication and will see John again in six months. Mrs. Doe is to call in June to arrange an appointment.
13/78	I called U.T. Rehabilitation and Engineering Clinic to schedule an appointment for John. The appointment was arranged for July 26, 1978, at 9:00 a.m.
26/78	I transported Mrs. Doe and John to U.T. Rehabilitation Clinic. John's chair was adjusted, and we are to return on July 29, 1978 for a medical review.
29/78	We returned to Crippled Children's for a medical review today.

SUPPLEMENTARY SERVICES

DATE	CHILD'S NAME	AGENCY	REASON
11/7/77	John Doc	Les Passees Rehabilitation Center: Memphis, Tennessee	Arrange appointment for an opthomology examination for John
11/7/77	John Doe	Roger's Clinic; Oxford, Mississippi	Obtain information for parents to see if they could treat handicapped child and if they accept Medicaid
11/14/77	John Doe	U.T. Rehabilitation Engineering Clinic; Memphis, Tennessee	Provided transportation for parent and child to pick up new M.P.I. chair
11/17/77	John Doe	U.T. Rehabilitation Engineering Clinic; Memphis, Tennessee	Inform Clinic of chair flaw and instructions
11/30/77	John Doe	U.T. Rehabilitation Engineering Clinic; Memphis, Tennessee	Take M.P.I. chair back for repairs
1[illegible]/5/77	John Doe	U.T. Department of Pediatrics - Genetics; Memphis, Tennessee	Inquire for parent about written test results and necessity for another appointment
1/30/78	John Doe	LeBonheur Children's Hospital; Memphis, TN Tennessee	Change appointment time to allow for EEG
2/2/78	John Doe	LeBonheur Children's Hospital; Memphis, Tennessee	Provide transportation to appointment with the neurologist
7/13/78	John Doe	U.T. Rehabilitation and Engineering Clinic; Memphis, Tennessee	Set up appointment for chair adjustments
7/26/78	John Doe	U.T. Rehabilitation Engineering Clinic; Memphis, Tennessee	Provide transportation to appointment for chair adjustments
7/2[illegible]/78	John Doe	Mississippi Crippled Children's Hospital; Memphis, Tennessee	Provide transportation for a medical review appointment

Mrs. Doe

PARENT TRAINING ACTIVITIES

DATE	TRAINING	TRAINER	TOPICS COVERED
11/10/77	Videotape of "Hewitt" - After School Special	Parent Educator	Mentally retarded boy's life at home and in the community
12/5/77	Newspaper article - "Pre-School Primer for Parents who want Prodigies"	Parent Educator	Need for home training
2/7/78	CEC Filmstrips and hand outs	Parent Educator	P.L. 94142
3/14/78	Home Movie Day	Parent Educator	Slide presentation of RUN children
5/25/78	"Parents as Partners" slide presentation and tour of the NMRC	Parent Educator	Parent training-Center's services
7/31/78	Vacation planning and Parent magazine articles	Parent Educator	Planning trips, need for vacation and availability of "The Exceptional Parent magazine"
9/28/78	"Feeding Program"	Parent Educator	Review of new feeding program for home
10/19/78	Exceptional Times: An Historical Perspective of Special Education"	Parent Educator	Special education through the years to the present and P.L. 94142
12/14/78	Activity-Potluck Christmas Dinner	Staff	

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate lesson assignments for discrimination between sounds, grasping objects, and searching for sound with eyes.

   Did you achieve this purpose?

   Yes

2. What family members were present?

   Mrs. Doe and her mother

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? How long did it take?

   four 40 minutes

5. What was the degree of parental interest?

   High XXXX Average ______ Poor ______

6. Were last week's activities followed?

   Yes XXXX No ______ Partially ______

   Which activities were not accomplished?

   None

7. Were continuation activities left? No

   Which ones?

Comments on visit: Discussed chair situation and SSI

Notes for future visits: Check with Welfare Office and Social Security Office about pay scale for SSI and ADC

Lisa Romine
Staff Member

November 16, 1977
Date

*Adapted from Working With Parents of Handicapped Children, prepared by Southwest Educational Development Laboratory and Published by The Council for Exceptional Children

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate localizing sound with eyes and head and grasping and bringing arms to midline

   Did you achieve this purpose?
   Yes

2. What family members were present?
   Mrs. Doe

3. To whom did you demonstrate the activity?
   Mrs. Doe

4. How may activities were demonstrated? How long did it take?
   four ten minutes

5. What was the degree of parental interest?
   High X Average ____ Poor ____

6. Were last week's activities followed?
   Yes X No ____ Partially ____

   Which activities were not accomplished?
   None

7. Were continuation activities left? Yes

   Which ones? localizing sound and holding object

Comments on visit: John's having problems in his new chair-needs attention. Also, Mrs. Doe wants John's feeding program expanded.

Notes for future visits: ____

Lisa Romine
Staff Member

December 14, 1977
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate holding rattle and grasping with palms and fingers and opposing thumbs. Left suggestions for olfactory and gustatory stimulation.
   Did you achieve this purpose?
   Yes

2. What family members were present?
   Mrs. Doe

3. To whom did you demonstrate the activity?
   Mrs. Doe

4. How may activities were demonstrated? How long did it take?
   two ten minutes

5. What was the degree of parental interest?
   High X Average ___ Poor ___

6. Were last week's activities followed?
   Yes X No ___ Partially ___
   Which activities were not accomplished?

7. Were continuation activities left? Yes
   Which ones? Grasping

Comments on visit:

Notes for future visits:

Lisa Romine
Staff Member

February 8, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate sensory stimulation

   Did you achieve this purpose?
   Yes

2. What family members were present?

   Mrs. Doe

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? How long did it take?

   two five minutes

5. What was the degree of parental interest?

   High X Average Poor

6. Were last week's activities followed?

   Yes X No Partially

   Which activities were not accomplished?

7. Were continuation activities left? Yes

   Which ones? olfactory stimulation

Comments on visit: Mrs. Doe had a good set of olfactory stimulus for John.

Notes for future visits:

Lisa Romine
Staff Member

April 5, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate oral exercises and tactile and sensory stimulation

   Did you achieve this purpose?

   Yes

2. What family members were present?

   Mrs. Doe

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? How long did it take?

   two fifteen minutes

5. What was the degree of parental interest?

   High X Average ____ Poor ____

6. Were last week's activities followed?

   Yes X No ____ Partially ____

   Which activities were not accomplished?

7. Were continuation activities left? Yes

   Which ones? Tactile stimulation

Comments on visit: Texture cube made-good job!

Notes for future visits: Visual stimulation lessons needed

Lisa Romine
Staff Member

June 14, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate oral exercises and tactile stimulation

Did you achieve this purpose?
Yes

2. What family members were present?

Mrs. Doe

3. To whom did you demonstrate the activity?

Mrs. Doe

4. How may activities were demonstrated? How long did it take?

two five minutes

5. What was the degree of parental interest?

High ______ Average x Poor ______

6. Were last week's activities followed?

Yes X No ______ Partially ______

Which activities were not accomplished?

N/A

7. Were continuation activities left? Yes

Which ones? Both

Comments on visit: Left notebook for Mrs. Doe to record any new activities of John's.

Notes for future visits: Visual motor exercises requested to strengthen eyes.

Lisa Romine
Staff Member

July 12, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate visual stimulation exercises and sensory stimulation exercises plus oral exercises.
   Did you achieve this purpose?

   Yes
2. What family members were present?

   Mrs. Doe
3. To whom did you demonstrate the activity?

   Mrs. Doe
4. How may activities were demonstrated? How long did it take?

   three fifteen minutes
5. What was the degree of parental interest?

   High X Average ____ Poor ____
6. Were last week's activities followed?

   Yes X No ____ Partially ____

   Which activities were not accomplished?

   none
7. Were continuation activities left? Yes

   Which ones? Tactile stimulation and oral exercises

Comments on visit: John went to Dr. Jabbour yesterday and received more medication. He is to return in six months. We also discussed the Batesville Child Development Center.

Notes for future visits:

Lisa Romine
Staff Member

August 9, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate oral exercises and grasping and visual stimulation

Did you achieve this purpose?

Yes

2. What family members were present?

Mrs. Doe

3. To whom did you demonstrate the activity?

Mrs. Doe

4. How may activities were demonstrated? How long did it take?

one ten minutes

5. What was the degree of parental interest?

High X Average____ Poor____

6. Were last week's activities followed?

Yes____ No____ Partially X

Which activities were not accomplished? visual stimulation

7. Were continuation activities left? Yes

Which ones? visual stimulation and oral stimulation

Comments on visit:____

Notes for future visits: check on holding list at North Mississippi Retardation Center.

Lisa Romine
Staff Member

September 6, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate oral stimulation and grasping and olfactory stimulation.

   Did you achieve this purpose?

   Yes

2. What family members were present?

   Mrs. Doe

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? How long did it take?

   two ten minutes

5. What was the degree of parental interest?

   High______ Average___X___ Poor______

6. Were last week's activities followed?

   Yes______ No______ Partially___X___

   Which activities were not accomplished?

7. Were continuation activities left? Oral stimulation and grasping

   Which ones?

Comments on visit: I told Mrs. Doe that John is on the holding list for NMRC, but that he would not be placed on the waiting list until she notifies them.

Notes for future visits: Call Batesville Child Development Center to see if they need any information on John.

Lisa Romine
Staff Member

September 20, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate feeding objectives

   Did you achieve this purpose?

   Yes

2. What family members were present?

   Mrs. Doe

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? How long did it take?

   two ten minutes

5. What was the degree of parental interest?

   High ____ Average X Poor ____

6. Were last week's activities followed?

   Yes ____ No ____ Partially X

   Which activities were not accomplished?

7. Were continuation activities left? No

   Which ones?

Comments on visit: Check on swivel chair for in the car. Will be coming until notified by the Batesville Child Development Center. Filled out Needs Assessment forms.

Notes for future visits:

Lya Romine
Staff Member

October 18, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate feeding objectives

   Did you achieve this purpose?

   Yes

2. What family members were present?

   Mrs. Doe

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? How long did it take?

   one fifteen minutes

5. What was the degree of parental interest?

   High ____ Average X Poor ____

6. Were last week's activities followed?

   Yes ____ No X Partially ____

   Which activities were not accomplished? Feeding

7. Were continuation activities left? Yes

   Which ones? Feeding

Comments on visit: Mrs. Doe needs the screw from John's chair that holds his foot pods on.

Notes for future visits:

Lisa Romine
Staff Member

November 1, 1978
Date

Project RUN

HOME TRAINING FORM

Child's Name John Doe

Parent(s) Mrs. Doe

1. Purpose of visit: To demonstrate auditory discrimination (Level I and II)

   Did you achieve this purpose?

   Yes

2. What family members were present?

   Mrs. Doe

3. To whom did you demonstrate the activity?

   Mrs. Doe

4. How may activities were demonstrated? two How long did it take? ten minutes

5. What was the degree of parental interest?

   High ____ Average x Poor ____

6. Were last week's activities followed?

   Yes ____ No ____ Partially x (feeding)

   Which activities were not accomplished?

7. Were continuation activities left? No

   Which ones?

Comments on visit: Mrs. Doe heard from the Welfare Department and they said she has been approved for services at the Batesville Center and should be hearing from them soon.

Notes for future visits:

Lisa Romine
Staff Member

November 29, 1978
Date

10/12/77

PARENT NEED ASSESSMENT

NAME: Mrs. Doe CHILD'S NAME John Doe

This need assessment is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each need area. This survey is conducted every eight (8) weeks.

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
1. Training in classroom activities and teaching methods. Comments:			XXXXXXX	
2. Suggestions for home activities for child. Comments:			XXXXXXX	
3. Help with managing the behavior of child (temper tantrums, toileting, eating habits). Comments: No temper tantrums, but eating, sleeping			XXXXXXX	
4. Suggestions for inexpensive or homemade learning and play materials. Comments: Anything that can benefit him			XXXXXXX	
5. Training for brothers and sisters of child. Comments: N/A				
6. Transportation to and from class. Comments: Reimbursement better own car				
7. Suggestions of other available services in the community (crippled children services, mental health center). Comments: It would help			XXXXXXX	

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
8. Articles and books on my child's handicapping conditions. Comments:			XXXXXXX	
9. Further interpretation of psychometric evaluations. Comments:		XXXXXXX		
10. Medical explanations of my child's handicap. Comments: Aware	XXXXXXX			
11. Counseling for family problems. Comments:	XXXXXXX			

12. Be specific in telling me what John's (child's name) limitations are that he/she has to overcome in life.

Problems in all areas

13. What handicaps do you expect John (child's name) to work on and improve?

Anything that he can

By what time?

14. What do you think would be the three (3) most helpful methods for parent/staff contact?

XXXXXX group meetings with films and speakers on general areas of interest

________ small group discussion on topics selected by parents.

XXXXXX individual conferences between parents and staff.

________ visit to family homes by staff.

XXXXXX classroom observation and participation by parents.

________ informal parent/staff gatherings (picnics).

Thinks all is good!!!!!

15. I could attend a meeting at day (time) on weekday preferably Sat. (day of week).

How often? once a month

Would you need transportation? No, not unless at night. Can't drive at night.

PARENT'S SHARING OF IDEAS

NAME: Mrs. Doe CHILD'S NAME John Doe

This information scale is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each topic. This survey is conducted every eight (8) weeks.

	YES	NO	TOO EARLY TO TELL	I DON'T KNOW
1. You feel your child really needs the type of program which we offer. Comments: Needs Physical Therapy. See Physical Therapist	XXXXXXXX			
2. You would be willing to discuss the Project RUN program for you and your child with: new program participants	XXXXXXXX			
public school groups		XXXX		
civic groups		XXXX		
Comments:				
3. You would consent to having you and other family members filmed or taped for use with Project RUN information dissemination. Comments:	XXXXXXXX			
4. You would consent to having your child's behavior and progress discussed with graduate practicum students from the University of Mississippi. Comments:	XXXXXXXX			
5. You would be willing to participate in monthly meetings. Comments:	XXXXXXXX			

	YES	NO	TO EARLY TO TELL	I DON'T KNOW
6. You feel that public schools, kindergartens, or other preschool programs should meet the developmental needs of your child. Comments: Yes, but if other programs were better, I would go to them	XXXXXXX			
7. You find it difficult sometimes to understand why other people can not understand your child's handicap. Comments: People say put him away	XXXXXXX			
8. You feel at ease discussing your feelings with other parents of handicapped children. Comments:	XXXXXXX			
9. You are comfortable explaining your child's problems to family: immediate (spouse, siblings)				
extended (grandparents, uncles)	XXXXXXX			
Comments:				
10. You feel that the Project RUN program of family participation makes too may demands on you. Comments:		XXXXXXX		

11. What specific ways has the parent program aided you?

Get away from house - being with people
Able to talk to people who have the same problem and understand

12. In what ways is the parent program failing to meet your needs?

None

13. What specific ways has your child's program aided him?

Feeding program - chewing, mouth closure
More alert
Able to get out

14. Have your monthly parent/staff meetings been helpful? Yes
Be specific.

12/11/77

PARENT NEED ASSESSMENT

NAME: Mrs. Doe

CHILD'S NAME John Doe

This need assessment is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each need area. This survey is conducted every eight (8) weeks.

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
1. Training in classroom activities and teaching methods. Comments:			XXXXX	
2. Suggestions for home activities for child. Comments:			XXXXX	
3. Help with managing the behavior of child (temper tantrums, toileting, eating habits). Comments: except eating	XXXXX			
4. Suggestions for inexpensive or homemade learning and play materials. Comments:			XXXXX	
5. Training for brothers and sisters of child. Comments: N/A				
6. Transportation to and from class. Comments: Reimbursement	XXXXX			
7. Suggestions of other available services in the community (crippled children services, mental health center). Comments:			XXXXX	

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
8. Articles and books on my child's handicapping conditions. Comments:			XXXXX	
9. Further interpretation of psychometric evaluations. Comments: unless can't understand	XXXXX			
10. Medical explanations of my child's handicap. Comments:	XXXXX			
11. Counseling for family problems. Comments:	XXXXX			

12. Be specific in telling me what John's (child's name) limitations are that he/she has to overcome in life.

Not alot to do-rearch his potential. Have chance.

13. What handicaps do you expect John (child's name) to work on and improve?

any-head control "Realistic to know won't walk."

By what time?

14. What do you think would be the three (3) most helpful methods for parent/staff contact?

__________group meetings with films and speakers on general areas of interest.

__________small group discussion on topics selected by parents.

__________individual conferences between parents and staff.

__________visit to family homes by staff.

__________classroom observation and participation by parents.

__________informal parent/staff gatherings (picnics).

Thinks all good

15. I could attend a meeting at day (time) on weekday preferably Sat. (day of week).

How often? once a month

Would you need transportation? No, not unless at night. Can't drive at night.

12/14/77

PARENT'S SHARING OF IDEAS

NAME: Mrs. Doe CHILD'S NAME John Doe

This information scale is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each topic. This survey is conducted every eight (8) weeks.

	YES	NO	TOO EARLY TO TELL	I DON'T KNOW
1. You feel your child really needs the type of program which we offer. Comments:	XXXXXX			
2. You would be willing to discuss the Project RUN program for you and your child with: new program participants	XXXXXX			
public school groups		XXXXXX		
civic groups		XXXXXX		
Comments: Work better with one or two people to express opinion.				
3. You would consent to having you and other family members filmed or taped for use with Project RUN information dissemination. Comments:	XXXXXX			
4. You would consent to having your child's behavior and progress discussed with graduate practicum students from the University of Mississippi. Comments:	XXXXXX			
5. You would be willing to participate in monthly meetings. Comments:	XXXXXX			

	YES	NO	TO EARLY TO TELL	I DON'T KNOW
6. You feel that public schools, kindergartens, or other pre-school programs should meet the developmental needs of your child. Comments: Would attend if he could benefit-not like babysitting. Her responsibility to get services	XXXXXX			
7. You find it difficult sometimes to understand why other people can not understand your child's handicap. Comments:	XXXXXX			
8. You feel at ease discussing your feelings with other parents of handicapped children. Comments:	XXXXXX			
9. You are comfortable explaining your child's problems to family: immediate (spouse, siblings)	XXXXXX			
extended (grandparents, uncles)	XXXXXX			
Comments:				
10. You feel that the Project RUN program of family participation makes too may demands on you. Comments:		XXXXXX		

11. What specific ways has the parent program aided you?

Make appointments
offer transportation (C.C.)
Instructions for training

Supplied entertainment-Elvis likes films
wants more-someone to rely on to talk about
John's and her problems.

12. In what ways is the parent program failing to meet your needs?

No

13. What specific ways has your child's program aided him?

Chair
P.T. aide
This benefits him more and more alert-aware

Mother feels there's a need to eat
twice a week to help her.

14. Have your monthly parent/staff meetings been helpful? Yes.
Be specific.

6/14/78

PARENT NEED ASSESSMENT

NAME: Mrs. Doe CHILD'S NAME John Doe

This need assessment is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each need area. This survey is conducted every eight (8) weeks.

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
1. Training in classroom activities and teaching methods. Comments:			XXXXXXX	
2. Suggestions for home activities for child. Comments:			XXXXXXX	
3. Help with managing the behavior of child (temper tantrums, toileting, eating habits). Comments:	XXXXXXX			
4. Suggestions for inexpensive or homemade learning and play materials. Comments:			XXXXXXX	
5. Training for brothers and sisters of child. Comments:	XXXXXXX			
6. Transportation to and from class. Comments: Like to transport own child	XXXXXXX			
7. Suggestions of other available services in the community (crippled children services, mental health center). Comments:		XXXXXXX	XXXXXXX	

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
8. Articles and books on my child's handicapping conditions. Comments:________________			XXXXXXX	
9. Further interpretation of psychometric evaluations. Comments:________________		XXXXXXX		
10. Medical explanations of my child's handicap. Comments:________________			XXXXXXX	
11. Counseling for family problems. Comments:________________	XXXXXXX			

12. Be specific in telling me what John (child's name) limitations are that he/she has to overcome in life.

Can not walk-any area-Head control

13. What handicaps do you expect John (child's name) to work on and improve?

Physical Therapy-feeding program-alert

By what time?

No definite time

14. What do you think would be the three (3) most helpful methods for parent/staff contact?

___X___ group meetings with films and speakers on general areas of interest

_______ small group discussion on topics selected by parents.

___X___ individual conferences between parents and staff.

___X___ visit to family homes by staff.

_______ classroom observation and participation by parents.

_______ informal parent/staff gatherings (picnics).

She thinks all are good!

15. I could attend a meeting at during the day (time) on Monday, Tuesday, and Thursday (all other days) (day of week).

How often? As often as necessary-once a month

Would you need transportation? NO

6/14/78

PARENT'S SHARING OF IDEAS

NAME: Mrs. Doe CHILD'S NAME John Doe

This information scale is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each topic. This survey is conducted every eight (8) weeks.

	YES	NO	TOO EARLY TO TELL	I DON'T KNOW
1. You feel your child really needs the type of program which we offer. Comments:	XXXXXXX			
2. You would be willing to discuss the Project RUN program for you and your child with: new program participants	XXXXXXX			
public school groups	XXXXXXX			
civic groups	XXXXXXX			
Comments:				
3. You would consent to having you and other family members filmed or taped for use with Project RUN information dissemination. Comments:	XXXXXXX			
4. You would consent to having your child's behavior and progress discussed with graduate practicum students from the University of Mississippi. Comments:	XXXXXXX			
5. You would be willing to participate in monthly meetings. Comments:	XXXXXXX			

	YES	NO	TO EARLY TO TELL	I DON'T KNOW
6. You feel that public schools, kindergartens, or other preschool programs should meet the developmental needs of your child. Comments:	XXXXXXX			
7. You find it difficult sometimes to understand why other people can not understand your child's handicap. Comments:	XXXXXXX			
8. You feel at ease discussing your feelings with other parents of handicapped children. Comments:	XXXXXXX			
9. You are comfortable explaining your child's problems to family: immediate (spouse, siblings)	XXXXXXX			
extended (grandparents, uncles)	XXXXXXX			
Comments:				
10. You feel that the Project RUN program of family participation makes too may demands on you. Comments:		XXXXXX		

11. What specific ways has the parent program aided you?

Classroom particapitation and observation-Have helped chair-Meeting other parents

12. In what ways is the parent program failing to meet your needs?

None

13. What specific ways has your child's program aided him?

feeding program-etc.

14. Have your monthly parent/staff meetings been helpful? Yes
Be specific.

Saw film on Project RUN

10/16/78

PARENT NEED ASSESSMENT

NAME: Mrs. Doe CHILD'S NAME John Doe

This need assessment is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each need area. This survey is conducted every eight (8) weeks.

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
1. Training in classroom activities and teaching methods. Comments:			XXXXXXX	
2. Suggestions for home activities for child. Comments:			XXXXXXX	
3. Help with managing the behavior of child (temper tantrums, toileting, eating habits). Comments:			XXXXXXX	
4. Suggestions for inexpensive or homemade learning and play materials. Comments:			XXXXXXX	
5. Training for brothers and sisters of child. Comments: NA	XXXXXXX			
6. Transportation to and from class. Comments:			XXXXXXX	
7. Suggestions of other available services in the community (crippled children services, mental health center). Comments:			XXXXXXX	

NEED AREAS:	NOT IMPORTANT	SOME IMPORTANCE	VERY IMPORTANT	I DON'T KNOW
8. Articles and books on my child's handicapping conditions. Comments:______________			XXXXXXX	
9. Further interpretation of psychometric evaluations. Comments:______________			XXXXXXX	
10. Medical explanations of my child's handicap. Comments:______________			XXXXXXX	
11. Counseling for family problems. Comments:______________		XXXXXXX		

12. Be specific in telling me what ______John's______(child's name) limitations are that he/she has to overcome in life.

physical therapy

13. What handicaps do you expect ______John______(child's name) to work on and improve?

Head control and physical control

By what time?

No set time.

14. What do you think would be the three (3) most helpful methods for parent/staff contact?

____X____group meetings with films and speakers on general areas of interest

_________small group discussion on topics selected by parents.

____X____individual conferences between parents and staff.

____X____visit to family homes by staff.

_________classroom observation and participation by parents.

_________informal parent/staff gatherings (picnics).

15. I could attend a meeting at daytime (time) on week (day of week).

How often? once a month

Would you need transportation? no

10/18/78

PARENT'S SHARING OF IDEAS

NAME: Mrs. Doe

CHILD'S NAME John Doe

This information scale is conducted in an interview style. The interviewer marks all parent responses on the scale after a discussion of each topic. This survey is conducted every eight (8) weeks.

	YES	NO	TOO EARLY TO TELL	I DON'T KNOW
1. You feel your child really needs the type of program which we offer. Comments:________	XXXXXXX			
2. You would be willing to discuss the Project RUN program for you and your child with: new program participants	XXXXXXX			
public school groups		XXXXXXX		
civic groups		XXXXXXX		
Comments:________				
3. You would consent to having you and other family members filmed or taped for use with Project RUN information dissemination. Comments:________	XXXXXXX			
4. You would consent to having your child's behavior and progress discussed with graduate practicum students from the University of Mississippi. Comments:________	XXXXXXX			
5. You would be willing to participate in monthly meetings. Comments:________	XXXXXXX			

	YES	NO	TO EARLY TO TELL	I DON'T KNOW
6. You feel that public schools, kindergartens, or other pre-school programs should meet the developmental needs of your child. Comments:__________	XXXXXXX			
7. You find it difficult sometimes to understand why other people can not understand your child's handicap. Comments:__________	XXXXXXX			
8. You feel at ease discussing your feelings with other parents of handicapped children. Comments:__________	XXXXXXX			
9. You are comfortable explaining your child's problems to family: immediate (spouse, siblings)	XXXXXXX			
extended (grandparents, uncles)	XXXXXXX			
Comments:__________				
10. You feel that the Project RUN program of family participation makes too may demands on you. Comments:__________		XXXXX		

11. What specific ways has the parent program aided you?
Help the child better, gives someone to talk to, transportation.

12. In what ways is the parent program failing to meet your needs? none

13. What specific ways has your child's program aided him?
feeding, education, alert

14. Have your monthly parent/staff meetings been helpful? yes.
Be specific.
Ideas and information

6-13-78

PROJECT RUN

QUARTERLY PARENT TRAINING EVALUATION FORM

NAME Mrs. Doe CHILD'S NAME John Doe

Please rate the following statements to help the staff adjust the parent training program to be the most effective possible. Check the response that best indicates how you feel about parent training. Please feel free to make comments or give suggestions.

	YES	NO	SOMETIMES	NEEDS IMPROVEMENT
1. The verbal directions the staff has given me were useful. Comments	XXXX			
2. The directions on the activity sheets were clear. Comments	XXXX			
3. I understood the objectives of all activities. Comments	XXXX			
4. Suggestions were made for materials to be used. Comments	XXXX			
5. The staff made me feel comfortable. Comments	XXXX			
6. I was involved in classroom activities. Comments I enjoy helping the teachers or staff working with him because it helps me with my homework.	XXXX			

	YES	NO	SOMETIMES	NEEDS IMPROVEMENT
7. I feel the activities do not demand too much of my time. Comments I have time most of the time to carry out the activities	XXXX			
8. I feel I can carry out the prescribed activities. Comments	XXXX			
9. There is a definite need for parent training. Comments I am always willing to learn new things to help John.	XXXX			
10. I feel there was a need for each activity. Comments I know that what ever I do for him, it will help him to be normal in the future.	XXXX			

Additional comments and/or suggestions:

*Adapted from Parental Involvement, South Dakota Preschool Program for the Handicapped, compiled and developed by Kareen Tidball-Strickler.

Parent Meeting Evaluation Sheet

Topic of Meeting: PUBLIC LAW 94-142

Person Presenting: Parent Educator

1. Was the meeting well organized? _X_ yes ___ no
2. Was the meeting interesting? _X_ yes ___ no
3. Was the material presented useful? _X_ yes ___ no
4. Was the material clearly presented? _X_ yes ___ no
5. Was there enough time for questions? _X_ yes ___ no
6. Were the objectives of the meeting clear? _X_ yes ___ no
7. If you could change this meeting, what would you do:

It was presented well; I have no suggestions

8. What topics do you suggest for future meetings?

*Adapted from Parental Involvement, South Dakota Preschool Programs for the Handicapped, compiled and developed by: Kareen Tidball-Strickler.

APPENDIX C

DEMONSTRATIONS

Identity of Group	Number Attended	Date
University of Mississippi Special Education Students	25	9-8-77
University of Mississippi Educational Psychology Students	12	9-12-77
University of Mississippi Secondary Education Students	8	9-19-77
University of Mississippi Social Work Students	18	10-5-77
University of Mississippi Social Work Students	13	10-11-77
Rust College Social Work Students	10	10-13-77
University of Mississippi Educational Psychology Students	40	11-4-77
Mississippi Valley State University Special Education Students	40	11-15-77
Mississippi University for Women Special Education Staff	13	11-16-77
University of Southern Mississippi Special Education Staff	3	11-17-77
McDougal Center Staff	14	11-21-77
Coffeeville High School Social Studies Class	13	12-2-77

DEMONSTRATIONS

Identity of Group	Number Attended	Date
Itawamba Junior College Nursing Class	29	12-9-77
Mississippi Delta Junior College Nursing Class	11	12-15-77
University of Mississippi Communicative Disorders Class	9	1-23-78
University of Mississippi Secondary Education Practicum Students	20	1-30-78
University of Mississippi Social Work Students	16	1-30-78
University of Mississippi Special Education Class	20	1-31-78
University of Mississippi Learning Disabilities Class	4	2-2-78
University of Mississippi Educational Psychology Class	4	2-7-78
University of Mississippi Learning Disabilities Class	2	2-9-78
Rust College Elementary Education Class	10	2-10-78
University of Mississippi Learning Disabilities Class	2	2-16-78
Holmes Junior College Student Nurses	12	2-21-78

DEMONSTRATIONS

Identity of Group	Number Attended	Date
Special Educators	20	3-1-78
Hudspeth Center Special Education Teachers	8	3-2-78
Crippled Children's Service Staff Members	6	3-2-78
University of Mississippi Philosophy Class	25	3-8-78
University of Mississippi Educational Psychology Class	12	3-10-78
University of Mississippi Special Education Class	8	3-15-78
Batesville Child Development Center Staff Members	3	3-16-78
University of Mississippi Educational Psychology Staff	2	3-16-78
Benton County Schools Staff Members	5	3-16-78
Baldwyn City School System Staff Members	2	3-16-78
Tippah County Schools Staff Members	4	3-16-78
Cleveland City School System Staff Members	2	3-16-78

DEMONSTRATIONS

Identity of Group	Number Attended	Date
North Mississippi Retardation Center Staff Members	69	3-16-78
Northwest Junior College Nursing Class	19	3-23-78
University of Mississippi Learning Disabilities Class	8	4-20-78
Holmes Junior College Nursing Class	19	4-25-78
Rust College Special Education Class	12	4-26-78
Sunflower County Schools Special Education Staff	2	4-28-78
BEH Consortium Group	6	5-15-78
Northwest Junior College Nursing Class	13	5-15-78
Northwest Junior College Nursing Students	4	5-16-78
Mississippi Deaf-Blind Program Staff Members	3	5-19-78
South Mississippi Retardation Center Staff Members	20	5-22-78
University of Mississippi Introduction to Mental Retardation Class	20	6-7-78

DEMONSTRATIONS

Identity of Group	Number Attended	Date
University of Mississippi Communicative Disorders Class	8	6-12-78
University of Mississippi Special Education Class	10	6-14-78
The Hartman, Hudspeth, and Stovall Families	17	6-15-78
University of Mississippi Child Psychology Class	6	6-19-78
University of Mississippi Health Care Administration Class	14	6-20-78
Panola County Child Development Center Staff Members	2	6-20-78
University of Mississippi Communicative Disorders Class	20	6-21-78
Blue Mountain College Educational Psychology Class	26	6-23-78
University of Mississippi Physical Education Class	4	6-23-78
Mississippi State University for Women Special Education Class	6	6-29-78
Hudspeth Center Special Education Teachers	10	7-11-78
University of Mississippi Elementary Education Students	20	7-19-78

DEMONSTRATIONS

Identity of Group	Number Attended	Date
Whitfield Nursing Home Staff Members	3	7-20-78
Northwest Junior College Nursing Students	10	8-1-78
University of Mississippi Medical Students	2	8-9-78
Mississippi Library Commission	4	8-24-78
Humphreys County Schools Special Education Staff Members	6	9-7-78
University of Mississippi Staff Members	12	9-27-78
Timber Hills Region IX Mental Health Retardation Community Services Staff Members	13	10-5-78
University of Mississippi Education Psychology Class	12	10-11-78
University of Mississippi Educational Class	6	10-19-78
University of Mississippi Special Education Class	2	10-31-78
Probation Officers Oxford District	7	11-3-78
Tunica Public Schools Staff Members	2	11-6-78

DEMONSTRATIONS

Identity of Group	Number Attended	Date
Business and Industrial Complex Child Care Class	15	11-17-78
University of Mississippi Educational Psychology Class	19	11-20-78
McDougal Center Staff Members	2	1-11-79
Mississippi State Board of Health Staff Members	3	1-11-79
Learning Resource Center Staff Members	10	1-18-79
Northeast Junior College Education Class	11	1-26-79
Hernando Elementary School Staff Members	4	2-2-79
University of Mississippi Elementary Education Class	15	2-6-79
Rust College Social Work Students	20	2-27-79
Hudspeth, Southern Mississippi, and Ellisville Centers Administrative Staff Members	4	3-2-79
Delta State University Students	2	3-12-79
Hudspeth Center Reimbursement Officers	3	4-20-79

DEMONSTRATIONS

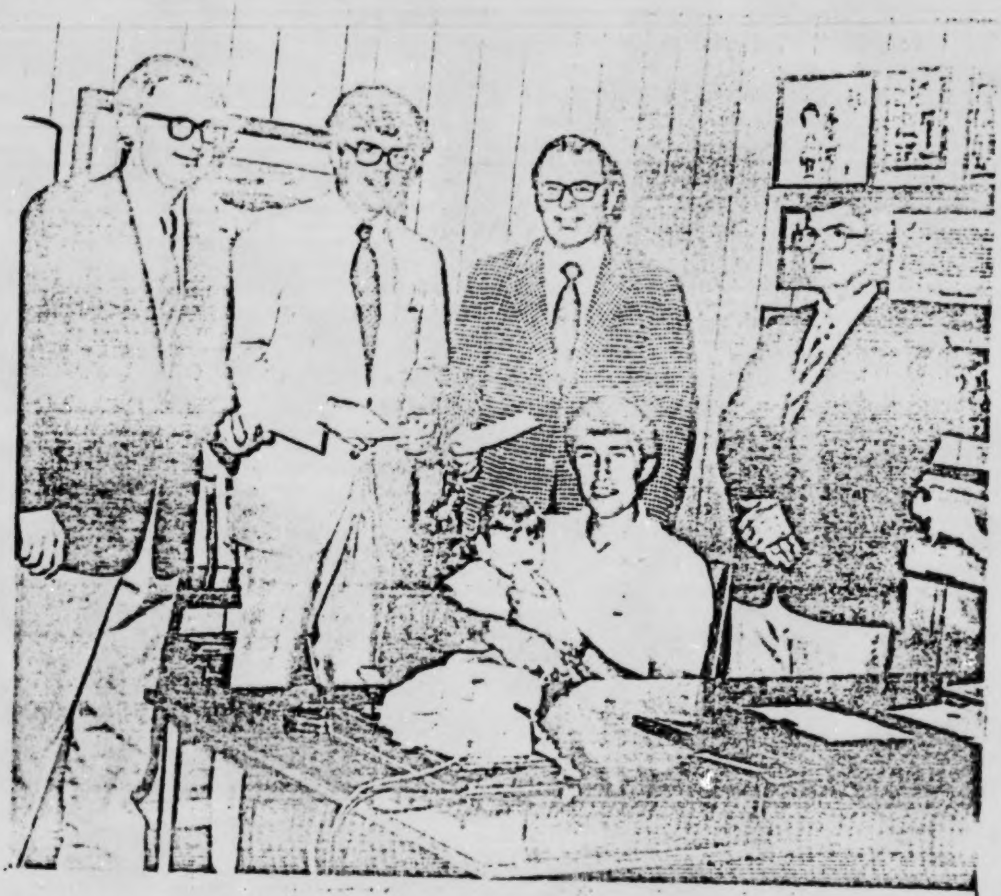
Identity of Group	Number Attended	Date
Ellisville State School Administrative Staff	4	4-20-79
Ellisville State School Administrative Staff	4	4-26-79
Coahoma County Day Care Center Staff Members	5	5-22-79
University of Mississippi Special Education Class	10	6-11-79
University of Mississippi Special Education Class	12	6-12-79
Mississippi Valley State University Survey of Exceptional Children Class	12	6-13-79
Mississippi University for Women Dr. Hunt's Class	15	6-14-79
University of Southern Mississippi Special Education Class	2	6-22-79
Mississippi Valley State University Psychology of Mentally Retarded Class	10	6-26-79
University of Mississippi Special Education Class	30	7-2-79
Hudspeth Center Staff Members	6	7-5-79
Willowood Center Staff Members	8	7-24-79

DEMONSTRATIONS

Identity of Group	Number Attended	Date
University of Mississippi Educational Psychology Students	30	7-30-79
Individuals	141	9-10-77 to 8-31-79

APPENDIX D

The Oxford Eagle—Wednesday, May 16, 1979—9



Contributions

Oxford's three bank presidents contribute $100 each as their bank's membership dues to the Mississippi Association for Retarded Citizens. Receiving the checks Ole Miss Head Football Coach Steve Sloan, Co-chairman for the "Bank on the Mentally Retarded" membership drive, and Christy Bay, a student at the North Mississippi Retardation Center's Early Education Day program. Others in the picture include Frank Cooper, Bank of Oxford; Bernie Smith, Oxford Bank and Trust; J. T. Black, First National Bank; and Billy Spears, Secretary, MARC.

—Photo by Whitten

10—The Oxford Eagle—Tuesday, April 17, 1979

Mrs. John Gilliland (center) displays the 17 ceramic Easter baskets and bunnies she prepared for Project RUN's Easter party last Thursday. Inspecting the baskets are (left) Mrs. Phil Huneycutt, Director of Staff Development at North Mississippi Retardation Centar and Mrs. Genora Holloway, Director of Project RUN.

Easter Bunny visits Project RUN program

The Easter Bunny came to Project RUN Thursday before Good Friday. The Easter Bunny was Mrs. John Gilliland of Mathiston, who single handlely made the 17 ceramic baskets and assorted bunnies for the RUN children.

Project RUN (Reaching Us Now) is a model program of 17 severely, profoundly, multiply handicapped children located at North Mississippi Retardation Center in Oxford. The program is funded by the United States Office of Education, Bureau of Education for the Handicapped.

The program at Project RUN begins with a comprehensive evaluation and individual program planning for each child. The children are accepted in the program from birth to eight years of age. Parental involvement is required and early intervention is accentuated.

The program, now in its third year, conducts workshops and disseminates written programs demonstrating program techniques for working with severely, profoundly, multiply handicapped children. Director of the program is Mrs. Genora Holloway.

The Oxford Eagle—Monday, January 22, 1979—3

Harold Houston, father of artist Kirby admired the winning poster as RUN Director Genora Holloway shows him a booklet bearing the RUN logo. Houston had not seen the winning poster so he made a visit to RUN this past week to see the idea his son had.

Project RUN in 3rd year of helping handicapped

Almost a year and a half ago Kirby Houston, a student at College Hill Academy won a poster contest.

This winning poster was to be the inspiration for the logo which is used on all materials disseminated by Project RUN an Early Education Program located on the campus of North Mississippi Retardation Center. RUN is a program for profound, severe, multiply handicapped youngsters from birth to eight years of age.

NOW IN ITS third year of funding by the United State Office of Education, Bureau of Education for the Handicapped, RUN has sent such booklets as : "A Parent Component: Involvement and Training," "Learning is Run-A Guide for Parents," and "What Do I Do? A Manual of Basic Information for Parents of Handicapped Children" to over 30 states and has had special requests for the material from groups in Idaho, Wyoming, Connecticut, Arkansas, Tennessee, Missouri, Kentucky and North Carolina.

"Project RUN is enthusiastic about sharing materials with others. We think those working with the handicapped will find them especially useful, "Genora Holloway, Director of RUN (Reaching Us Now) said.

All the RUN materials bears the logo which Kirby Houston's poster inspired. For more information of Project RUN materials contact, North Mississippi Retardation Center, Box 967, Oxford or phone 234-1476.

c9
1/17/79
[illegible]

EDUCATION CENTER

Volume I
Number II
Date, January, 1979

Post Office Box 10356
Westland Station
Jackson, Mississippi 39209
601-353-1664

HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAMS IN MISSISSIPPI

Handicapped children in Mississippi are presently being served by three Bureau of Education for the Handicapped First Chance Projects over the state. The Early Education Center OUTREACH takes this opportunity to feature these projects in an effort to inform its readers of the current strides in providing increased quality as well as quantity of services for the handicapped in this state.

PROJECT RUN--Reaching Us Now

Project RUN, an early education program for the handicapped, is located at the North Mississippi Retardation Center in Oxford, Mississippi.

Project RUN is a service program for a combination of community and institution children who are within the age range of birth to eight years of age. Project RUN is currently serving eighteen children all of whom have been diagnosed severely/profoundly multiply handicapped. Each child receives an individualized education program in the area of communication, pre-speech, feeding, special education, and physical therapy.

RUN also offers a parent training program which includes classroom observation, home training, mass media presentations, and monthly parent meetings.

The program is designed to demonstrate the value of early intervention in promoting optimal development with the severely/profoundly multiply handicapped and to teach techniques in working with the multiply handicapped.

STEP--Sequential Training Experience in the Psychomotor Domain

Project STEP is located in Meridian, Mississippi, and has as its fiscal agency the Meridian Public Schools. STEP provides services for trainable and lower educable handicapped children ranging in age from zero to eight years.

This program provides learning experiences which enhance the development of movement skills that integrate the cognitive, affective and psychomotor domains. Project STEP, through a sequential task-learning process, assists handicapped children in becoming more successful in managing their bodies in a wide variety of movement situations which are multi-sensory in nature.

Parents work with the staff of Project STEP in determining the handicapped child's psychomotor development functioning level and receive training which enables them to continue sequential training with individual children.

The newest HCEEP project is presented on the next page.

North Mississippi Herald, Water Valley, Thursday, September 14, 1978

Project RUN

Mrs. Baljit Shaliwal, a Tupelo City Schools Special Education Teacher of the multiply handicapped (left) observes Project RUN Director, Mrs. Genora Holloway of Water Valley (at right) as she distributes toys at the recent workshop for the handicapped in Oxford. Volunteer, Kathy Oliphant is trying to interest Eddie in a ball.

Project RUN Helps Train SE Teachers

"Every teacher who works with the handicapped should attend this workshop," Mrs. Baljit Shalival, Special Education Teacher for the multiply handicapped of Tupelo City Schools was speaking of the three day symposium held at Project RUN located at North Mississippi Retardation Center the last week in August.

The symposium was the first of many planned to help teachers experience working with young, severely, profoundly, multiply handicapped children. It enabled teachers from Lee and Humphreys Counties to receive "hands-on" experience in teaching special education classes, feeding and conducting group activities. The RUN Speech Pathologist, Mrs. Teresa Ellis and Physical Therapist Aid, Mr. Michael Clark provided information on the procedures and techniques

Lee County Schools felt the RUN experience was a realistic actual situation that is a good reference point for parents as well as teachers.

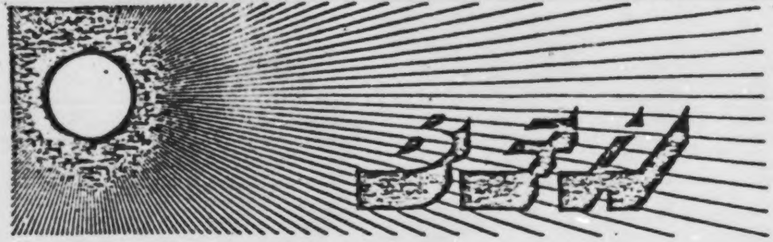
Future on-site training programs for working with the multiply handicapped are on the agenda of RUN. Enrollment is available through the director of the program, Mrs. Genora Holloway, 234-1476 Extension 219 or 253 or by writing RUN, Box 967, Oxford, Ms. 38655. Project RUN is an Early Education Program for the severely, profoundly, multiply, handicapped child and is funded by the U. S. Office of Education, Bureau of Education for the Hndicapped.

"Locating and
Providing Resources
for the Handicapped
In Head Start"

The Mississippi RAP Newsletter

SUMMER 1978
Published by
Chapel Hill Training-
Outreach Project

The Bureau of Education for the Handicapped PROJECTS IN MISSISSIPPI



PROJECT RUN

PROJECT RUN, an early education program for the handicapped, is located at the North Mississippi Retardation Center in Oxford, Mississippi. Project Run is a service program for a combination of institutionalized and non-institutionalized children who are within the age range of birth to eight years or functioning at a level below that which would be expected upon a child's completion of the third grade. All of the fifteen students presently enrolled have been diagnosed as severely/profoundly multiply handicapped.

Project Run is staffed by a program director, teacher, speech pathologist, parent educator, physical therapist aide, teacher's aide, and secretary.

Each child receives an individualized educational program in the areas of communications, pre-speech, feeding, special education, and physical therapy. When not involved in an individual lesson, the children are involved in a group activity carried out by the teacher's aide and practicum students from the University of Mississippi. Group activities include music, water play, finger painting, cooking experience, shaving creme art, storytimes, and Mr. Fasoo.

Project Run serves as a model demonstration program and an onsite training unit for teachers, administrators, University students, parents, and others. Three day on-site training workshops are held periodically to give participants first hand experiences in working with the severely/profoundly multiply handicapped. Each facet of the program is presented in detail: feeding, pre-speech, education, communication, and physical therapy. Anyone interested in more information on these workshops may contact Project RUN.

Project RUN has assembled a packet of materials for dissemination. This includes an Assessment/Curriculum for the severly/profoundly multiply handicapped, a bibliography of resources available to use in programming for the handicapped child, a booklet of activities that parents can do with their children at home, a manual for parents, and a manual for Foster Grandparents and surrogate parents.

For any additional information contact:

Project RUN
Cenora Holloway, Director
North Mississippi Retardation
Center
P. O. Box 967
Oxford, Mississippi 38655
Phone: (601) 234-1476
Extensions: 219 or 253

Outlook Seven

QUARTERLY NEWSLETTER REGION SEVEN AMERICAN ASSOCIATION ON MENTAL DEFICIENCY

SUMMER, 1978

* * * * *

PROJECT RUN IN NORTH MISSISSIPPI CENTER GIVES HOPE FOR TOMORROW

The RUN program is a $76,000 federally funded Early Education Program funded by the Bureau of Education for the Handicapped through the North Mississippi Retardation Center, Oxford, Mississippi. The program is now in its second year of funding and is one of a few early education programs in the U.S. which serves severely and profoundly multiply handicapped children from birth to eight years of age. Ms. Genora Holloway, Director, states, "All children in this program are not mentally retarded, however, all are severely or profoundly handicapped. Eight of the fifteen children have cerebral palsy involvement. We help them develop to their potential physically and educationally and counsel their parents who work with us in the program."

Children in the RUN program receive an individualized education program in the areas of communications, special education, physical therapy, feeding, group activities, water therapy and library. In addition to Ms. Holloway, the staff includes Ms. Teresa Ellis, Speech Pathologist; Ms. Kathy Sewell, Special Education Teacher; and two teacher aides. Mr. Michael Clark is the Physical Therapist Assistant and Ms. Lisa Romine is the Parent Educator.

The project provides training for staff of the North Mississippi Retardation Center and serves as a model demonstration program for teachers, administrators, university students, parents and surrogate parents.

For additional information, contact Ms. Rachael Keener at the North Mississippi Retardation Center, P. O. Box 967, Oxford, Mississippi 38655.

* * * * * *

May 6-7, 1978 The Clarksdale Press Register

Suzanne Flowers of Clarksdale, a practicum student in social work at the University of Mississippi is finishing up her work at Project RUN, an early education program for the profound, multiply handicapped children at North Mississippi Retardation Center in Oxford. Through the University Affiliated Program and in conjunction with the University of Mississippi, North Mississippi Retardation Center is able to help university students attain required practicum hours and university students like Suzanne help the handicapped of N.M.R.C. who in turn serves Coahoma County. The RUN program is funded by the Office of Education, Bureau of Education for the Handicapped.

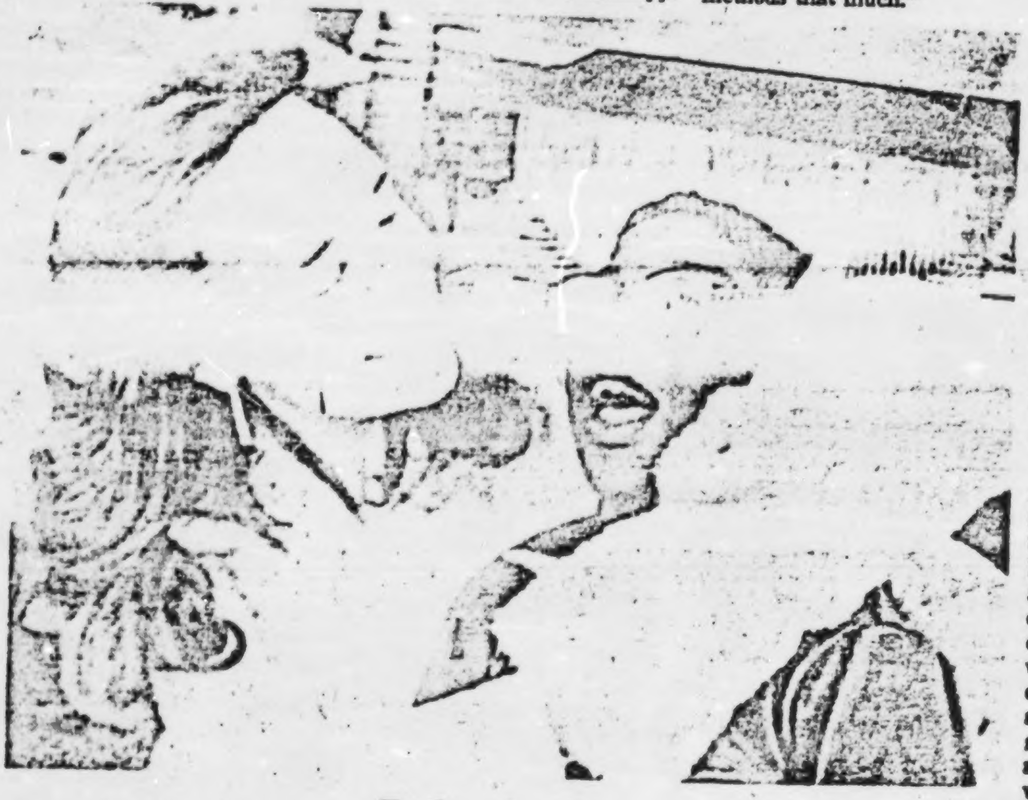
Kathy Tanner interns with NMRC Project RUN

"After teaching the first grade for two and a half years at Cleveland, and one and a half years in West Memphis, Ark., I felt the classroom teacher was not getting sufficient training in how to take care of practical classroom problems and in basic subject matter.

"So I decided to go back to school again," said Ms. Kathy Tanner of West Memphis, Arkansas, who already had a BSE Degree from the University of Arkansas and a MSE Degree from Arkansas State. "Ole Miss has a very good early education program and I was happy to begin my doctorate in early childhood education here," Ms. Tanner continued.

The University of Mississippi, in conjunction with the North Mississisppi Retardation Center, furnishes practicum training for university students. That's how Kathy began, in January, working in Project Reaching Us Now (RUN) located at North Mississippi Retardation Center in Oxford. RUN is designed for severely profoundly, multiply handicapped children and is an in-service training site for teachers, administrators, university students, parents and surrogate parents, N.M.R.C. staff and others. It is funded by the Office of Education, Bureau of Education for the Handicapped.

"It has been such fun working here," Tanner said, "and I haven't had to change my methods that much."



Role playing

Kathy Tanner, recipient of Junior Auxiliary scholarship, and Puppet Pazoo are role playing with Jerry, a student of the RUN Program, located at North Mississippi Retardation Center.

"Kathy has made us realize the severely, profoundly, multiply handicapped child should have the same activities the other children have, fun things in learning as well as academic things. They need new experiences like seeing popcorn popped, making apple popcorn and peanut butter balls, and finger painting," Genora Holloway, Director of Project RUN said.

"Kathy is willing to try new things. She see the need of physical programming for our children," Genora continued "She has helped the children acquire better socialization skills through her group activity training." The group activity training includes, among other things, role playing with Pazoo, a special puppet character Project RUN children especially enjoy.

While at Project RUN Ms. Tanner has written a booklet entitled, "Learning is Fun," which is at the publisher's now. This is a book of activities parents can do with their children at hhome.

Recently Kathy received notice of a national scholarship for which she was sponsored by the Junior Auxiliary of West Memphis, Arkansas, which will allow her to develop a curriculum for chronically ill children. This scholarship which will allow Kathy to complete her doctorate, is awarded on the basis of scholarship, achievement, need and the type of project for which the money is used.

Everyone at Project RUN agrees Kathy deserves the scholarship, especially the RUN students who are excited about the whole new world she has opened up for them.

The Oxford Eagle—Wednesday, March 22, 1978—7B

NMRC Project RUN aids handicapped

By RACHAEL KEENER

Last week Project RUN, a program for the multiply handicapped child from birth to eight years of age at N.M.R.C., demonstrated to parents, teacher and students the work it is doing in promoting optimal development of the handicapped.

Special feeding techniques were demonstrated at the RUN Open House, oral stimulation exercises to aid speech difficulties were explained, motor stimulation to aid development in work and playing and to prevent the formation of habits which would hinder these activities were shown.

With a teacher ratio of one student for one teacher this project is funded by the Office of Education, Bureau of Education for the Handicapped and operates through the North Mississippi Education Department. It represents special equipment, special teachers and much devotion.

This program is aiming to help handicapped children function better at home and at North Mississippi Retardation Center and in the public school system. It is aimed at preventing institutionalization and promoting deinstitutionalization.

By the third week in April Project RUN will have set up a regular Tuesday, Wednesday and Thursday schedule for teachers and college students to experience the work it is doing in early intervention in promoting optimal development of the multiple severely handicapped child. On site training sessions may be arranged by writing Mrs. Genora Holloway, Project RUN, N.M.R.C. or by telephoning 234-1476 Extension 219 and 253.

Northeast Mississippi Daily Journal, Tupelo, Mississippi, Week-End Edition, March 18-19, 1978

Preventing Institutionalization Aim Of 'Reaching Us Now'

OXFORD, Miss. — Preventing severely, profoundly, or multiply handicapped children from having to reside in institutions is one of the major objectives of Project "Reaching Us Now (RUN)" at the North Mississippi Retardation Center.

The three-year, federally funded program, set up in a section of the NMRC complex, was created for children from the age of birth through eight years old.

Fifteen children are participating in the program, eight of whom are residing at the institution. The other seven are coming in three days a week from communities within the 23-county NMRC region.

Seven professional staff members work one-to-one with each of the 15 children. Included in the staff are a parent educator, speech pathologist, special education teacher, physical therapist aide, teacher's aide, secretary, and program director. Also helping are a University of Mississippi doctoral student, two undergraduates, and a social work student.

Being a model program, helping to develop the 15 handicapped children to their potential is just part of Project Run's mission.

A three-day, on-site training program is being offered by the project for all special education teachers, administrators, university students, parents, surrogate parents, NMRC staff, and others in the 23-county area during the current demonstration year which began Aug. 31, 1977.

"We've had no response from the public school systems, so far," Director Tom Holloway said. Part of the problem has been inadequate publicity which Holloway hopes to remedy with intensified efforts.

She pointed out there is no charge for the three-day program, and motel accomodations will be provided free for the on-site training participants.

"By the program's termination date on Aug. 31, 1979, it is anticipated area educators would have been shown: (1) the need for early intervention for promoting optimal development, (2) that on-site training will have enabled those who are working with the severely/profoundly/multiply handicapped to utilize the appropriate techniques required for working with these children, and (3) that the materials disseminated by Project RUN will have had an impact upon those engaged in programming for the handicapped," according to Holloway.

Holloway said there are "definitely" children and adults in the five state institutions who would not be in them if they had received the type of therapy and education which Project RUN is providing.

The project is being funded by the U.S. Office of Education, Bureau of Education for the Handicapped. During the first year $64,000 was provided, $76,000 is being provided during the current year, and $[illegible],000 will be allocated during the last year.

JACKSON DAILY NEWS B-Tuesday, March 11, 197

'Project Run' Sets Open House Thursday

OXFORD — Project Run is planning an open house here Thursday from 8:30 a.m. until 2:30 p.m. to demonstrate how a model handicapped children's early education program functions.

Project Run is located in the Hartman Building on the campus of the North Mississippi Retardation Center here in Oxford.

Project Run stresses early education for the severely handicapped in the area as a hope for a more fruitful life.

Project Run is in its second year of federal funding and serves as a demonstration program and on site training unit for teachers.

Children in the Run program receive as individualized education program in the areas of communication and or speech, special education, physical therapy, feeding, group activities, water therapy and library study.

The staff here involved with the Project Run includes Mrs. Genora Holloway, a speech pathologist; Mrs. Teresa Ellis, a special education teacher, Miss Kathy Sewell and two teacher's aids, Eddie Hilliard and Debbie McKissack.

Michael Clark is the physical therapist asssitant and Miss Lisa Romine the parent educator.

Project RUN schedules open house on March 16

By RACHAEL KEENER

Project RUN is having an open house March 16 from 8:30 a.m. until 2:30 p.m. to demonstrate how a model handicapped children's early education program functions. Project RUN is located in the Hartman Building on the North Mississippi Retardation Center campus. RUN stresses early education for the severely and profoundly multiply handicapped as a hope for a more fruitful life for the child and his family. The program is funded by the Office of Education, Bureau of Education for the Handicapped.

Fifteen children from birth to eight years of age participate in the program. These children live in Batesville, Tupelo, Pittsboro and Oxford and others live at the North Mississippi Retardation center which serves the 23 northern counties of Mississippi.

Project RUN, in its second year of federal funding, serves as a model demonstration program and on site training unit for teachers, administrators, university students, parents and surrogate parents, North Mississippi Retardation Center staff and others.

Children in the RUN Program receive an individualized education program in the areas of communications and or pre-speech, special education, physical therapy, feeding, group activities,water therapy and library. The RUN staff consists of a director, Mrs. Genora Holloway; a Speech Pathologist, Mrs. Teresa Ellis; A Special Education Teacher, Miss Kathy Sewell and two teacher's aids, Mr. Eddie Hilliard and Ms. Debbie McKissack, Mr. Michael Clark, is the physical therapist assistant and Miss Lisa Romine the Parent Educator.

This program has actively involved parents and foster grandparents who participate in training programs, classroom observations, home training, mass media presentations and monthly parent meetings.

Mrs. Holloway, Director of Project RUN says, "I'm anxious for the public to see how much can be accomplished with these children and to exchange ideas with those interested."

Kathy Tanner, University of Mississippi doctorial candidate works with a project RUN student at the North Mississippi Retardation Center in Oxford as Foster Grandparent, Mrs. Tex Kendrick looks on. RUN is an Early Education for the Handicapped Program which will have open house March 16.

Developing skills

Genora Holloway, Director of Project RUN at North Mississippi Retardation Center (left) assists J. J. (RUN student) develop his feeding skills. This Early Education Program is one of four in the United States that serves multiply handicapped children from birth to eight years of age.

RUN program plans to demonstrate techniques

By RACHAEL KEENER

The RUN program began last January at North Mississippi Retardation Center. This year plans are to demonstrate techniques the program has

We also counsel the parents who work with us in the program," Mrs. Holloway continued.

RUN emphasizes the need

area served by N.M.R.C. and five from the Center are involved in the RUN Program at present. Mrs. Holloway reports that by October other children presently on RUN's

APPENDIX E

Project RUN Early Education Assessment/Curriculum for the Severely/Profoundly Multiply Handicapped. This program was designed for planning and implementing an educational/therapeutic program. The program includes four (4) areas on infant development within the 0-48 month age level. The areas include: auditory discrimination, visual-fine motor, communication, and gross motor (facilitation/maintenance therapy are inlcuded in the gross motor area). Supplementary experiences in the areas of sensory perception and socialization are included. These activities are assumed to be an important part of the program for all children but no specific objectives are set for individuals as a part of the therapeutic program; however, it should be used by families in the home environment and for group activities within the classroom environment.

The program format lends itself readily for providing instructional alternatives for individual differences (mental/motor/sensory handicaps): (1) the child is allowed to respond to tasks by alternative means of communication (naming, touching, verbal yes/no, gestural yes/no, directional eye movement); (2) the child is allowed to progress through several levels of assistance (physical assistance, minimum physical assistance, verbal cues, and request); (3) the format of the gross motor area allows for individualized procedures to be incorporated into the assessment and teaching procedure by the physical therapist (procedures used are dependent upon the child's physical abnormalities); (4) the communication area provides functional word lists which enable the user to choose words which best meet the child's individual functional needs.

Although the Assessment/Curriculum provides for various means of response, sometimes a prerequisite to language itself may be required (example: blissymbols, communication boards, pre-speech exercises, etc.). Consultation with other professionals may indicate that such needs exist. If so, these programs are provided as a supplement to the RUN Assessment/ Curriculum. When alternative means of communication are used, the same words/concepts contained in the Assessment/Curriculum word lists are used.

The format of the Assessment/Curriculum is specifically designed to bridge the gap between assessment and program implementation. This was accomplished through: (1) providing a format whereby assessments can be conducted and the program can be implemented using the same form and materials; (2) establishing developmentally sequenced long term objectives (annual goals) for each area; (3) dividing these long term objectives into short term objectives (task analysis of the long term objective); (4) writing each objective in behavioral terms (measurable); (5) forming recording procedures for pinpointing of specific objectives mastered and those which need to worked on; (6) incorporating a comprehensive formative and summative data collection system into the format. For example, the format contains the long term objectives, the short term objectives to fulfill the long term objectives, materials, and procedures for assessing and teaching. The format also contains space for recording assessment data and for recording the following teaching data; criterion for completion, reinforcement procedures, daily progress for a two week period, and the date when each short term objective was started and completed.

The Assessment/Curriculum forms are printed on heavy weight paper and are contained in a three-ring binder (the users master copy). This enables the user to photocopy the necessary forms for use with each child's assessment and classroom/home/cottage program. Master copies of the Assessment/Curriculum are provided for writing specialized programs. A master copy of a profile form is also included which may be used for charting each child's progress.

The Prelinguistic Language Assessment/Curriculum is a program for early language learning. The terminal behavior in the program was defined as a required "verbal" response to a stimulus. In this context an appropriate response would be at the highest level of which the child is capable, either verbal, gestural, or by means of a communication board, depending on physical limitations.

The format lends itself readily to assessing the child's existing skills and to teaching those that he cannot perform. The curriculum is designed for recording each child's daily developmental progress, the level of assistance, the criterion level, the date initiated/date completed, and a comment section for other pertinent data.

The content of the Assessment/Curriculum is printed on heavy weight paper and contained in a 3-ring binder which enables the user to xerox the assessment and curriculum forms for use with each individual student. The objectives in this Assessment/Curriculum were adapted to Project RUN's Assessment and Curriculum forms from Language Development and Language Disorder by Lois Bloom and Margaret Lahey.

Assessment/Curriculum for Feeding the Physically Involved Child provides a comprehensive program for delineating long-term and short-term objectives for the dependent and independent feeder. The speech and language pathologist and special education teacher who has had limited involvement with the physically handicapped child will find this assessment/curriculum invaluable when the teaching of eating skills becomes a major curricular consideration for these seriously handicapped children.

The format lends itself readily to assessing the child's existing skills and to teaching those that he cannot perform. The curriculum is designed for recording each child's daily developmental progress, the level of assistance, the criterion level, the date initiated/completed, and a comment section for other pertinent data. The content of the Assessment/Curriculum is printed in heavy weight paper and contained in a 3-ring binder which enables the user to xerox the assessment and curriculum forms for use with each individual student. The objectives in this assessment/curriculum were adapted to Project RUN's assessment and curriculum forms from Curricula Strategies for Teaching Functional Object Use, Non-Verbal Communication, Problem Solving, and Mealtime Skills to Severely Handicapped Students by Lou Brown, John Nietupski, Steven Lyon, Susan Humre-Nietupski, Tim Crowner, and Lee Gruenewald.

A Parent Component - Involvement and Training describes the program designed and offered for Project RUN parents. A project description, philosophy of parent involvement, description of the parent education program, and forms are included. The importance of early intervention is stressed as well as the need for parent involvement in the education of severely/profoundly multiply handicapped children.

Learning is Fun - A Guide for Parents is a compilation of activities that parents can do with their handicapped child in the home environment. The booklet is also an excellent source for group activities in an educational setting. The activities included in the booklet are designed to develop language skills, motor skills, sensory awareness and socialization skills.

Project RUN Bibliography of Resources for Serving the Handicapped is a list of books, magazine and journal articles the Project RUN staff have found useful for serving handicapped children. Three basic areas are covered: programming for the handicapped child, parents and their handicapped children, and technical aspects of being handicapped.

Project RUN Materials and Test Index is a summation of the materials and products that Project RUN has found to be most effective when working with the severely/profoundly multiply handicapped child. Also included is a purchase price and company index.

What Do I Do? - A Manual of Basic Information for Parents of Handicapped Children provides parents of handicapped children information that could aid them in receiving services and assistance. Evaluations, types of programming, service agencies and advocate groups are discussed. It is stressed throughout the manual that these parents are not alone and they need only to go out and seek help for their handicapped child.

APPENDIX F

PROJECT RUN

ON-SITE TRAINING SCHEDULE

Tuesday

Introduction and Evaluation	8:30 - 9:00
Slide-Video Presentation	9:00 - 10:00
Coffee Break	10:00 - 10:15
Group Time Observation - Observation Room	10:15 - 11:00
Special Education Observation - Observation Room	11:00 - 11:30
Group Socialization and Music - Observation Room	11:30 - 12:00
Lunch	12:00 - 1:00
Physical Therapy Observation - Observation Room	1:00 - 1:45
Speech Therapy Observation - Observation Room	1:45 - 2;30
Question and Answer Session	2:30 - 3:00
IEP Explanation	3:00 - 3:30

Wednesday

Group I - Special Education; Group II - Physical Therapy; Group III - Communications (Observe in Classroom)	8:30 - 9:30
Group I - Physical Therapy; Group II - Communications; Group III - Special Education (Observe in Classroom)	9:30 - 10:30
Group I - Communications; Group II - Special Education; Group III - Physical Therapy (Observe in Classroom)	10:30 - 11:30
Lecture - Feeding Equipment	11:30 - 12:00
Feeding Program - Observation Room	12:00 - 1:00
Lunch	1:00 - 2:00
Lecture - Parent Training, Evaluation, and/or Nutrition	2:00 - 3:00
Question and Answer Session	3:00 - 3:30

Thursday

Classroom Preparation and Observation - Classroom	8:30 - 9:30
Group I - Teaching Special Education; Group II and Group III - Group Activities	9:30 - 10:00
Group II - Teaching Special Education; Group I and Group III - Group Activities	10:00 - 10:30
Group III - Teaching Special Education; Group I and Group II - Group Activities	10:30 - 11:00
Lecture - Parent Training, Evaluation, and/or Nutrition	11:00 - 12:00
Lunch	12:00 - 1:00
Tour of North Mississippi Retardation Center	1:00 - 2:00
Question and Answer Session and Post-Evaluation	2:00 - 2:30

**These workshops are being offered to public school personnel, University students, administrators, parents, and other interested persons.

**Workshops will be scheduled as needed.

**Arrangements can be made for motel arrangements in the Hartman Motel at North Mississippi Retardation Center, at no cost to the participants, by contacting Mrs. Genora Holloway, Director of Project RUN.

APPENDIX G

Coordination strategies have been established by RUN with the following agencies, organizations, and/or doctors.

1. State Department of Education
   Jackson, MS 39205

2. Sylvia Taylor
   Pittsboro, MS 38951

3. Regional Rehabilitation Center
   Tupelo, MS 38801

4. Les Passes Rehabilitation Center
   Memphis, TN 38103

5. LeBonheur Children's Hospital
   Memphis, TN 38103

6. University of Tennessee - Department of Pediatrics
   Memphis, TN 38163

7. Roger's Clinic
   Oxford, MS 38655

8. State Disability Determination Service
   Jackson, MS 39205

9. University of Tennessee Rehabilitation Engineering Clinic
   Memphis, TN 38114

10. Easter Seals Society of Tupelo
    Tupelo, MS 38801

11. Lee County Health Department
    Tupelo, MS 38801

12. Social Security Administration
    Tupelo, MS 38801

13. Lafayette County Health Department
    Oxford, MS 38655

14. Lee County Department of Public Welfare
    Tupelo, MS 38801

15. Dr. Horace Baggett - Pediatrician
Oxford, MS 38655

16. St. Jude Children's Hospital
Memphis, TN 38801

17. Oxford Child Development Center (Public School Program)
Oxford, MS 38655

18. Mississippi Crippled Children Services
Memphis, TN / 38114

19. Children's Clinic - Dr. Summers
Oxford, MS 38655

20. South Panola Child Development Center
Batesville, MS 38606

21. Kaye Products, Inc.
Durham, NC 27701

22. Panola County Health Department
Batesville, MS 38606

23. Dr. Joseph Burnett
Oxford, MS 38655

24. Multiply Handicapped Class
Tupelo, MS 38801

25. Dr. Robert P. Christopher
University of Tennessee
Memphis, TN 38163

26. Crippled Children's Services
Jackson, MS 39205

27. Early Intervention Program
Baton Rouge, LA 70805

28. University of Tennessee Child Development Center
Memphis, TN 38105

29. Mississippi Association for Retarded Citizens

30. Mississippi Chapter of the American Association of Mental Deficiency

31. Public Schools
Twenty-three County Area (plus others)
North Mississippi

32. Developmental Centers
Twenty-three County Area (plus others)
North Mississippi

33. South Mississippi Retardation Center
Long Beach, Mississippi 39560

34. Friends of Children of Mississippi
Jackson, MS 39213

35. Early Education Center
Jackson, MS 39205

36. Project S.T.E.P.
Meridian, MS 39301

37. Hudspeth Center
Whitfield, MS 39193

38. Mississippi University Affiliated Program
Regional - Oxford, MS
State - Jackson, MS

39. State Department of Mental Health
Division of Mental Retardation
Jackson, MS 39201

ack
5/4/79
Copy Sp. Ed
+
Project Run

Mississippi University for Women
Columbus, Mississippi 39701

Department of Special Education
Center for Special Children

April 27, 1979

Dr. Randy Hendrix, Director
North Mississippi Mental Retardation Center
P. O. Box 967
Oxford, Ms. 38655

Dear Dr. Hendrix:

I wish to express my appreciation for the "Project Run" materials. They have been used as an invaluable resource in our graduate special education courses. You really have developed and validated a landmark program for the infant/preschool child.

You and the "Project Run" staff have every right to be proud of your research. Several of our staff are ordering copies of some of these materials.

Sincerely,

James W Hunt

James W. Hunt, Director
Special Education

rk

MISSISSIPPI ASSOCIATION FOR RETARDED CITIZENS
POST OFFICE BOX 5093•3000 OLD CANTON ROAD•SUITE 585
JACKSON, MISSISSIPPI 39216•(601)362-7981

June 5, 1979

Ms. Genora Hollaway, Director
Project Run
North MS. Retardation Center
P. O. Box 967
Oxford, MS 38655

Dear Ms. Hollaway,

On behalf of the Association, I want to sincerely thank you, Ms. Romine, and Ms. Boswell, for your participation in our 1979 annual convention. We appreciated your presentation of "Project Run."

You certainly know my personal feelings regarding North Mississippi and especially your Project. Keep up the good work!

Sincerely,

Marty

Martha P. Melton
Executive Director

MPM/dw

"When you give help you give hope"

Humphreys County School District

JESSE L. GREGG, SUPERINTENDENT

WALTON SMITH
PRINCIPAL

LOWER ELEMENTARY SCHOOL
901 CHURCH STREET
BELZONI, MISSISSIPPI 39038

THOMASINE M. BROWN
ASSISTANT PRINCIPAL

ANNIE LAURIE MAXWELL
ASSISTANT PRINCIPAL

Mrs. Mary Meador, Aide
Severly/multiply Handicapped
Humphreys County Schools
Belzoni, Miss. 39038

Mrs. Dorothy Brock, Aide
Severly/Multiply Handicapped
Humphreys County Schools
Belzoni, Miss. 39038

Mrs. Shirley Gowdy, Mother
215 Harpole St.
Belzoni, Miss. 39038

Thank you again for your help.

Sincerely yours,

Janet Berry

Janet Berry
Supervisor of Special Education
Humphreys County Schools

Humphreys County School District

JESSE L. GREGG, SUPERINTENDENT

WALTON SMITH
PRINCIPAL

THOMASINE M. BROWN
ASSISTANT PRINCIPAL

ANNIE LAURIE MAXWELL
ASSISTANT PRINCIPAL

LOWER ELEMENTARY SCHOOL
901 CHURCH STREET
BELZONI, MISSISSIPPI 39038

September 30, 1978

Mrs. Genora Holloway, Director
Project RUN
North Miss. Retardation Center
Oxford, Miss.

Dear Mrs. Holloway:

I want to say a special thank you for the one day workshop the staff of our severly/multiply handicapped unit attended. We have had inservice with a number of programs for severly involved children. However, Project RUN techniques, activities, and especially the assessment curriculum are by far the most adaptable for our purposes. The following persons attended the workshop and would like to be included on your mailing list:

Mrs. Annie B. Simmons, Teacher
Severly/Multiply Handicapped
Humphreys County Schools
Belzoni, Miss. 39038

Mrs. Margaret Wood, Teacher
Severly/Multiply Handicapped
Humphreys County Schools
Belzoni, Miss. 39038

Mr. Curtis Ball, Aide
Severly/Multiply Handicapped
Humphreys County Schools
Belzoni, Miss. 39038

MERIDIAN PUBLIC SCHOOLS
PROJECT S.T.E.P.
1015 25th Avenue P.O. Box 31
Meridian, Mississippi 39301
(601)483-6271

October 20, 1978

Ms. Genora Holloway
Director, Project RUN
North Miss. Retardation Center
P. O. Box 967
Oxford, MS. 38655

Dear Genora,

Thank you for sending the materials I requested at the AAMD meeting in Jackson last week. I appreciate your prompt response.

We are in the process of developing our parent program and will, therefore, find your material beneficial.

Sincerely,

Jo Anne Corley

Jo Anne Corley,
Coordinator, Project S.T.E.P.

JAC/ms

The Mississippi RAP

November 28, 1978

Mrs. Genora S. Holloway, Director
Project RUN
North Miss. Retardation Center
P. O. Box 967
Oxford, Mississippi 38655

Dear Mrs. Holloway:

We sincerely appreciate the information given us by Kathy Boswell concerning Project RUN. We did use that information in our newsletter and we regret you did not get a copy.

We are enclosing copies of that newsletter as well as our most recent one. Please accept our apologies for not sending a copy sooner. Thank you.

Sincerely,

Valerie Campbell

Valerie Campbell

VC/pb

Enclosures

Chapel Hill Training Outreach Project
Lincoln Center
Chapel Hill, N.C. 27514
Tel. – 919-967-8295

Friends of Children of Mississippi
119 Mayes Street
Jackson, Mississippi 39213
Tel. – 601-362-1541

South Mississippi Retardation Center

1170 West Railroad Street
Long Beach, Mississippi 39560

William H. Staley, Jr.
Director

(601) 868-2923

November 29, 1978

Mr. Albert R. Hendrix, Director
North Mississippi Retardation Center
Post Office Box 967
Oxford, Mississippi 38655

Dear Randy:

We appreciate very much receiving the curricula, teaching aids, bibliographies, etc. produced by Project RUN. They will be of great benefit in the development of our own infant programming.

If we may assist you in any way, please do not hesitate to call.

Sincerely,

William H. Staley, Jr.
Director

WHS:ef

cc: ✓Ms. Genora S. Halloway
Director of Project RUN

Mrs. Patricia T. McCarthy
SMRC Coordinator of Residential Services

West Tallahatchie School District

Webb, Mississippi 38966

April 4, 1979

Project Run
North Mississippi Retardation Center
Post Office Box 967
Oxford, Mississippi 38655

Dear Mrs. Holloway:

We would like to thank you and your staff for the fine hospitality shown during the three day workshop and stay at the center, March 20,21, and 22, 1979.

The workshop was both informing and rewarding.

We look forward to continuing a most pleasant and rewarding relationship with you.

Very truly yours,

Ruth M. Lewis

(Mrs.) Ruth M. Lewis,
Special Education Supervisor

MERIDIAN PUBLIC SCHOOLS
PROJECT S.T.E.P.
1015 25th Avenue P.O. Box 31
Meridian, Mississippi 39301
(601)483-6271

October 4, 1977

Genora Holloway
Project RUN
North Mississippi Retardation Center
P.O. Box 967
Oxford, MS 38655

Dear Genora:

Our visit to Project R.U.N. was both educational and enjoyable. Our experiences with the sharing of information aspect among BEH projects has been tremendous, and your response was equally helpful. Please convey these thoughts to your staff.

We are looking forward to seeing you in the future and would like to extend an invitation for you to visit Meridian when we get underway.

Thank you for the use of the materials.

Sincerely,

Gene Kidder

Pam
Pamela P. Murray, Ed. D.

PPM/mh

Ellisville State School

Ellisville, Mississippi

39437

November 20, 1978

Ms. Genora S. Holloway
North Mississippi Retardation Center
P. O. Box 967
Oxford, MS 38655

Dear Genora:

I apologize for the delay in writing to congratulate the BEH project RUN on the material you've developed and the progress that has been made. It is certainly with the assistance of these kinds of programs that we are able to insure the most appropriate services for the developmentally disabled citizens of our state and come closer to reaching our goal of maximum development.

Any time that I can be of assistance, please feel more than free to call on me.

Sincerely yours,

Paul D. Cotten

Paul D. Cotten, Ph. D.
Director

PDC/te

Department of Education, Lee County

LEROY E. BELK, SUPERINTENDENT

BOX 832

Tupelo, Mississippi 38801

842-3347

Sept. 12, 1978

Dear Genora,

Jaljit, Pearl, Opal and I want to thank you for the excellent staff training sessions you provided for us. They were most informative and helpful and gave everyone first hand experience in preparation for working with our children.

Everyone came back all enthusiastic and we have made bibs, decorated the room, set up schedules, etc.

We enjoyed the helpful attitude of your staff, and I enjoyed seeing and working with all of you again –

Thank you again and please come to see us when you are in Tupelo.

Sincerely,

Barbara

REGIONAL MENTAL HEALTH CENTER

SERVING SEVEN COUNTIES
LAFAYETTE
CALHOUN
PANOLA
MARSHALL
YALOBUSHA
TATE
DE SOTO

MICHAEL R. SUIB, PH. D.
CLINICAL PSYCHOLOGIST
DIRECTOR OF PROFESSIONAL SERVICES

PHONE (601) 234-7521
HWY 7 BYPASS SOUTH
P.O. BOX 1137
OXFORD, MISSISSIPPI 38655

August 25, 1978

Miss Lisa Romine
Project RUN
North Mississippi Retardation Center
Oxford, Mississippi 38655

Dear Lisa:

Just a note to say thank you for the informative in-service program that you conducted for our staff on Wednesday, August 23. We appreciate your time and effort. As a result of your talk, our staff will be able to more appropriately refer clients to Project RUN and to other NMRC services. Thanks again!

Very truly yours,

Jennie Walsh

Jennie R. Walsh, Ph.D.
Director, Consultation and Education

JRW:pc

ack
6/2/78
Copy Project
R

PRENTISS COUNTY CHILD DEVELOPMENT PROGRAM
HIGHWAY 30 BY-PASS
P. O. Box 642
PHONE: (601) 728-7714
BOONEVILLE, MISS., 38829

June 1, 1978

Dr. Randy Hendrix, Director
North Mississippi Retardation Center
Oxford, MS

Dear Dr. Hendrix:

I recently had the privilege of spending three days at your facility.

I was most impressed with the facility and the great service you are rendering the people of North Mississippi. I was also very impressed with project RUN and its services. It appears to be one of the most organized and well run programs of its kind anywhere around.

Sincerely,

A. Cunningham

Avenell Cunningham

P. S. I especially appreciated your comments about our mutual friend, James Nunnally.

PRENTISS COUNTY CHILD DEVELOPMENT PROGRAM
HIGHWAY 30 BY-PASS
P. O. Box 642
PHONE: (601) 728-7714
BOONEVILLE, MISS., 38829

June 1, 1978

Mrs. Genora Holloway, Director
Project Run
North Mississippi Retardation Center
Oxford, MS

Dear Mrs. Holloway and Staff:

Thank you for letting me spend three days with your program. Project RUN is most impressive and was very helpful to me. I learned much and hope that I can implement some of the ideas I got while visiting there.

A little later I will be contacting you about sending a group over for in-service from our program.

Sincerely,

Avenell Cunningham

Ellisville State School

Ellisville, Mississippi

39437

December 1, 1978

Ms. Jenora Holloway
North MS Retardation Center
P. O. Box 967
Oxford, MS 38655

Dear Jenora:

Thank you for your participation in the Curriculum Conference held at Paul B. Johnson State Park.

We accomplished a great deal in the time we were there, and the conference was greatly enhanced by your personal contribution. I feel that we will have a product we can be proud of when we are through.

Thank you again for sharing your time, experience and expertise.

Sincerely,

Joyce Mims

Joyce Mims, Ph.D.
Co-Chairperson

JM/cd

APPENDIX H

PARENT RESPONSE TO PROGRAM

We would like to get your thoughts and opinions regarding Project RUN. Your responses will serve as an evaluation of our services. Check the letters which indicate your feelings.

SA: Strongly Agree A: Agree D: Disagree SD: Strongly Disagr

NA: Not Applicable

SA	A	D	SD	NA	
12	1				1. I feel that I received necessary staff input when it was important to me.
11	2				2. Discussing the results of assessments and testing of my child was valuable to me in my understanding of him and his needs.
10	3				3. I feel I had as much input as necessary in the development of my child's individual education plan.
11	2				4. I learned techniques in Project RUN that helped me to adequately assist with my child's program at home.
					5. I think adequate training was given me in the program to help me understand and utilize activities in the following areas:
9	3			1	A. Receptive Language
7	2			4	B. Expressive Language
10	3				C. Fine or Gross Motor
10	3				D. Visual Stimulation
10	3				E. Auditory Stimulation
11	2				F. Physical Therapy
10	3				6. The requirements of parents in Project RUN were not too demanding.
7	1			5	7. The majority of the parent meetings provided insight and ideas helpful to me.
10	3				8. My knowledge and understanding of my child's handicaps increased sufficiently during my participation in Project RUN.
9	2			2	9. Home training enabled me to observe more of my child's behaviors and chart his daily progress.
6	3			4	10. I was given many opportunities to evaluate the parent program and recommend changes.
9	4				11. I feel there were sufficient opportunities for parents to observe and participate in their child's programming sessions.
9	1			3	12. My skills for working with my child increased from my participation in the parent program.

SA	A	D	SD	NA	
10	3				13. My knowledge of related services and adaptive devices available to my child increased from my contact with Project RUN.
10	3				14. I feel the staff provided worthwhile activities for me to work on with my child at home.
9	4				15. My involvement in an early childhood education program made me more aware of my child's learning abilities and difficulties.
7	5			1	16. My suggestions and ideas concerning the program were adequately listened to by the staff.
12	1				17. I feel the program provided the support I needed, such as specific instrucitons and materials, to carry out home activities.
11	2				18. The activities provided by Project RUN were beneficial and helpful.
12	1				19. Overall, Project RUN was successful in meeting my child's needs.
12	1				20. Overall, I was satisfied with the services that Project RUN provided me as a parent.

Additional Comments: